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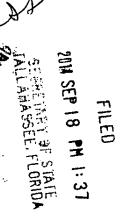
(Requestor's Name)
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9/24/14

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Corporation Disso	lutral .
DOCUMENT NUMBER: PO8 0000 982	
The enclosed Articles of Dissolution and fee are submitted	for filing.
Please return all correspondence concerning this matter to the	e following:
Name of Contact Person)	
Green Chili India (Firm/Company)	an Pistro Inc
(Firm/Company)	
10932 Villege Green (Address)	
Scrivole F) 337	72
(City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Contact Person) at (702)	417-4534
(Name of Contact Person) (Area	Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
□ \$35 Filing Fee ♣ \$43.75 Filing Fee & □ \$43.75 Filing Certified Copy (Additional copenclosed)	Certificate of Status &
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

FILED

Pursuant to articles of d	section 607.1401, Floissolution:	orida Statutes, this	s Florida profi	t corporati <mark>n</mark>	nus cen idedi Seorenige	PM 1:37 ne following i 3F STATE EE. FLORIDA		
FIRST:	The name of the co	rporation as curre	ntly filed with	the Florid	Departmen	nt of State:		
	6	eca Chili	Inlian	pisho	In			
SECOND:	The document num	ber of the corpora	ation (if know	n): PO8	0000 987	197		
THIRD:	The file date of the articles of incorporation: $87 \cdot 11 - 3 - 200$							
FOURTH:	(CHECK AT LEA							
	None of t	he corporation's s	hares have be	en issued.				
	☐ The corp	oration has not co	mmenced bus	iness.				
FIFTH:	No debt of the corporation remains unpaid.							
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.							
SEVENTH:	Adoption of Dis	solution (CHEC	K ONE)					
A majority of the incorporators authorized the dissolution.								
☐ A majority of the directors authorized the dissolution.								
Sign		Samue - ent or other officer - if civer, trustee, or other o				incorporator - if		
		(Typed or prin	5HAtm ted name of person	∕t 1 signing)				
		Pres:	-					
(Title of Person Signing)								

Filing Fee: \$35