## P08000/04/93

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations	
SUBJECT: ARPI ENTERTAINMENT, INC.	
DOCUMENT NUMBER: P08000104193	
The enclosed Articles of Dissolution and fee are submitted to	for filing.
Please return all correspondence concerning this matter to the	e following:
CLAUDIO RESNICK	
(Name of Contact Person)	,
(Firm/Company)	
(Address)	Sales and the sales and the sales are sales and the sales are sales and the sales are
(City/State and Zip Code)	¥ -
For further information concerning this matter, please call:	
\	. ) 766-9583  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 copenciosed)	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

Pursuant to sections 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation is:

ARPI ENTERTAINMENT, INC

P08000104193

SECOND: The date dissolution was authorized: 12/31/2010

THIRD: Adoption of Dissolution (Check One)

- ✓ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
- Dissolution was approved by vote of the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve

The number of votes cast for dissolution was sufficient for approval by ...... (voting group)

Signed this 11 day of FEBRUARY, 2011

Signature\_

OR

(By the Chairman or Vice Chairman of the Board, President, or other officer)

CLAUDIO RESNICK
Name
PRESIDENT
Title