12 61 DEC-19-2011 26 14 nerations Division of Col Florida Department of State **Division of Corporations** ₽5⁴ **Electronic Filing Cover Sheet** Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H110002963513))) H110002963513ABC Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. To: Division of Corporations Fax Number : (850)617-6380 From: : BUSINESS FILINGS Account Name Account Number : 105256001620 <u>.....</u> : (608)827-5300 Phone DEC Fax Number : (608)827-5501 2 8: 08 Q **DISSOLUTION OR WITHDRAWAL** :21 HJ RECEIVE **DEAL-STOP INC.** DEC 19 AN ်ာ သ Certificate of Status 0 Certified Copy Ð Page Count 02 \$35.00 Estimated Charge Corporate Filing Menu **Electronic Filing Menu** Help 12/19/2011 https://efile.sunbiz.org/scripts/efilcovr.exe

ARTICLES OF DISSOLUTION

1-2

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

FIRST:	The name of the corporation as currently filed with the Florida Department	of State:		
	Deal-Stop Inc.			
SECOND:	The document number of the corporation (if known): P09000012617			
THIRD:	The date dissolution was authorized:			•
	Effective date of dissolution if applicable:	m file date))	
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes case was sufficient for approval.	t for diss	olutio	n
	Dissolution was approved by the shareholders through voting groups.			
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled		
	The number of votes cast for dissolution was sufficient for approval by	≥s g	<u>fort</u>	
			DEC	100
	(voting group)	ALL ALL	DEC 19	4
	emelle Abe the 2	OF SEAR	PH 12: 58	
	Signature: (By a prector, president or other officer - if directors or officers have not been selected, by an incorporator - if if the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	**		
	Jemelle Abraham			
	(Typed or printed name of person signing)			
	President			
	(Title of person signing)			
	Filing Fee: \$35			

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