PD9000050146

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: PROINCI HOUSING, INC	
DOCUMENT NUMBER: P09000050146	
The enclosed Articles of Dissolution and fee are submitted	ed for filing.
Please return all correspondence concerning this matter to	o the following:
CARLOS A. BARBOZA	
(Name of Contact Person	n)
PROINCI HOUSING, INC.	
(Firm/Company)	
6901 CORAL WAY	
(Address)	
MIAMI FL 33155	
(City/State and Zip Coo	de)
For further information concerning this matter, please cal	l:
	6 _{·)} <u>303-6816</u>
(Name of Contact Person) (Ar	rea Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
S35 Filing Fee ✓ \$43.75 Filing Fee & S43.75 Filing Fee & Certified Contact (Additional enclosed)	• •
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 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:
	PROINCI HOUSING, INC.
SECOND:	The document number of the corporation (if known): P0900050146
THIRD:	The date dissolution was authorized: AUG. 31, 2010
	Effective date of dissolution <u>if applicable:</u> AUG. 31, 2010 (no more than 90 days after dissolution file date)
FOURTH:	Adoption of Dissolution (CHECK ONE)
	Dissolution was approved by the shareholders. The number of votes cast for dissolutio was sufficient for approval.
	Dissolution was approved by 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)
	Signature:
	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	CARLOS A. BARBOZA
	(Typed or printed name of person signing)
	DIRECTOR
	(Title of person signing)

Filing Fee: \$35