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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

Division of Corporations	
SUBJECT: Triple Gas Inc.	
DOCUMENT NUMBER: PO90006194	[7
The enclosed Articles of Dissolution and fee are submitted	for filing.
Please return all correspondence concerning this matter to th	ne following:
Wehas Allayas	•
(Name of Contact Person)	to the first of th
(Firm/Company)	
•	
(Address)	14.87.4
Gratus, fr 2 (City/State and Zip Code)	
. ,	,
For further information concerning this matter, please call:	
. at (
	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)	y 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 section 607.1401, Florida Statutes, this Florida profit corporation submits in Florida Statutes, the Florida Profit Carlos Statutes and the Florida Statutes and

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	Triple Gas Inc.
SECOND:	The document number of the corporation (if known): P90001947
THIRD:	The file date the articles of incorporation: 12269
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	The corporation has not commenced business.
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 Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Sign	ature:
	(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.)
	Menad Al-Sayed (Typed or printed name of person signing)
	President (Title of Person Signing)

Filing Fee: \$35