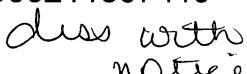
P09000077118

(Requestor's Name)				
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu:	siness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



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09/09/11--01026--003 **35.00



100R 9/12/11

COVER LETTER

TO: Amendment Section	હ ં			
Division of Corporations				
5				
SUBJECT: Dissolution of Manufactureelephant Inc				
-				
DOCUMENT NUMBER: P09000077118				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Michelle Menendez				
(Name of Contact Person)				
Manufactureelephant Inc				
(Firm/Com	pany)			
1805 Ponce de Leon Blvd Apt 722	2			
(Address)				
Coral Gables, Fl. 33134				
(City/State and	Zip Code)			
For further information concerning this matter, ple	ease call:			
Michelle Menendez	799-9936			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
•	, , ,			
Enclosed is a check for the following amount:				
	.75 Filing Fee & \$\Bigsim\$\$\$ \$\sigma\$\$ \$\sigma\$\$ \$\sigma\$\$ \$\sigma\$\$ \$\sigma\$\$ \$\sigma\$\$\$ \$\sigma\$\$ \$\sigma\$\$\$ \$\sigma\$\$			
	ified Copy Certificate of Status & Certified Copy			
·	losed) (Additional copy is			
	enclosed)			
MAILING ADDRESS:	STREET ADDRESS:			
Amendment Section	Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle			
1 1111111111111000, 1 11 122 17	Tallahassee, FL 32301			



ARTICLES OF DISSOLUTION

011 SEP -9 PH 12: 00

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the college of STATE articles of dissolution:

	** •			
FIRST:	The name of the corporation as currently filed with the Florida Department of State:			
	Manufactureelephant Inc			
SECOND:	The document number of the corporation (if known): P09000077118			
THIRD:	The file date of the articles of incorporation: 09/15/2009			
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.)				
Michelle Menendez				
(Typed or printed name of person signing)				
VSD				
(Title of Person Signing)				

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporat	_{ion:} Manuractureerephant i	IC .	
	will be the date the dissolution is filed witteles of Dissolution.	th the Department of State or as	
Description of infe	ormation that must be included in a claim:		
resolution of p	ayment of unknown claims agains	st this corporation as provid	ed in s. 607.1407, F.S.
_	here claims can be sent: (Claims cannot be	•	ons)
	Coral Gables, Fl 33134		
			<u></u>
	e above named corporation will be barred r the filing of this notice.	unless a proceeding to enforce the	claim is commenced
Michelle M	enendez Printed Name of the Person Filing	Signature of the Person	on Filing .

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00