P10000049649

(Re	equestor's Name)	
-		
(Ac	ddress)	
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(Ad	ddress)	
•		
(Ci	ty/State/Zip/Phone #	¥)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name	e)
(Do	ocument Number)	•
Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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C.COULLIETTE

NOV 0 4 2010

EXAMINER

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: DISOLUTION OF INCO	OR PORATION
DOCUMENT NUMBER: P100000 49	649
The enclosed Articles of Dissolution and fee are	submitted for filing.
Please return all correspondence concerning this is.	natter to the following:
KISHORE PATEL (Name of Conta	ct Person)
Shru Dhana Laxmi lonc (Firm/Con	ipany)
Ocale, FL 34471 (City/State and) For further information concerning this matter, pl	Zip Code)
Kishose Palel (Name of Contact Person)	at (<u>353</u>) <u>236 /559</u> (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Cer (Ad	3.75 Filing Fee & \$\sum \\$52.50 Filing Fee, tified Copy
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 607.1401, 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:
•	Shace Dhana Laxmi lone
SECOND:	The document number of the corporation (if known): P100006 49649
THIRD:	The file date of the articles of incorporation: <u>66.10.2010</u>
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.
	A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution.
Sign	$\mathcal{L}_{\mathbf{a}}$, $\mathcal{D}_{\mathbf{a}}$, $\mathcal{D}_{\mathbf{a}}$, $\mathcal{D}_{\mathbf{a}}$
8	(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.)
	(Typed or printed name of person signing)
	Pre 8, dent (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 Corporation: Shace Ohana Laxmi Inc. Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Run out of business. Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Kishose Patel 4108 516 C18Cle Oegla Pl. 34474 A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

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