9/10000059460

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
| |
| |

Office Use Only



500234655575

05/04/12--01036--009 **35.00

Witten Sho

12 HAY -4 PH 3: 13
SECRETARY OF STATE
SECRETARY OF STATE

MAY 0 9 2012 T. ROBERTS

COVER LETTER

TO: Amendment Section

| Division of Corporations | | |
|---|--|--|
| SUBJECT: DINORA DESIG | NS INC. | |
| DOCUMENT NUMBER: P10 | 5000 59460. | |
| The enclosed Articles of Dissolution and fee are sub | mitted for filing. | |
| Please return all correspondence concerning this matt | er to the following: | |
| NORA GARAL (Name of Contact Po | erson) | |
| DINIORA De | signs. | |
| DINORA DESIGNS. (Firm/Company) | | |
| 9320 Fontane bleg (Address) | w Blud # B115 | |
| Miami Fl | | |
| (City/State and Zip | Code) | |
| For further information concerning this matter, please call: | | |
| NORA Garay at (| (Area Code & Daytime Telephone Number) | |
| (Name of Contact Person) | (Area Code & Daytime Telephone Number) | |
| Enclosed is a check for the following amount: | | |
| Certificate of Status Certific | Filing Fee & \$\sum \\$52.50 Filing Fee, cd 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 articles of d | section 607.1401, Florida Statutes, this Florida profit corporation submits the following 3 issolution: [ALLAHAS SEE FLORI] | |
|---|---|--|
| FIRST: | The name of the corporation as currently filed with the Florida Department of State: | |
| | DINDRA DESIGNS DR. | |
| SECOND: | The document number of the corporation (if known): P10000 059460 | |
| THIRD: | The file date of the articles of incorporation: $\frac{12 3 \sqrt{2011}}{}$ | |
| 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.) NORA Gay | |
| | (Typed or printed name of person signing) The sident (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. 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: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Footaine bleau Blod 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