Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000276792 3)))



H110002767923ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: SMART TAX

Account Number: I20090000034

Phone

: (954)782-3610

Fax Number

: (954)366-3239

DISSOLUTION OR WITHDRAWAL ESPACO VIDA SAUDAVEL, INC.

Certificate of Status	0	
Certified Copy	0	
Page Count	02	
Estimated Charge	\$35.00	

Electronic Filing Menu

Corporate Filing Menu

Help

HII 000 276792 3 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:	
	ESPACO VIDA SAUDAVEL, INC.		
SECOND:	The document number of the corporation (if known): P10000082721		51 1
THIRD:	The date dissolution was authorized: 11/22/2011	· · · · · · · · · · · · · · · · · · ·	
	Effective date of dissolution if applicable: (no more than 90 days after dissolution)	un file date)	
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cas was sufficient for approval.	t for disso	olution
	Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled	
	The number of votes cast for dissolution was sufficient for approval by		·.
		ţ	· 0
	(voting group)	. = == 	IVISIO
)V 2;	N OF
:	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)	2 AM 10: 21	RY OF STATE CORPORATION
	na: (huotay)		¢n
	FELIPE DE MORAES BATISTA		
	(Typed or printed name of person signing)		
	DIRECTOR		
	(Title of person signing)		

H 110002767923