Division of Corporations Electronic Filing Cover Sheet

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.

(((H110000541573)))



H110000541573ABCY

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 : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

Phone : (305)552-5973

fax Number : (305)220-1440

DISSOLUTION OR WITHDRAWAL

CARLY 04 CORP.

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

FILED

IMAR -1 PM 3: 11

ECRETARY OF STATE

LAHASSEE, FLORIT

Electronic Filing Menu

Corporate Filing Menu

Help

1Brown 3-1-11

H11000054157

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:
	Carly 04 Corp.
SECOND:	The document number of the corporation (if known): P10000086497
THIRD:	The date dissolution was authorized: 03-1-1/
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)
FOURTH:	Adoption of Dissolution (CHECK ONE)
	Dissolution was approved by the shareholders. The number of votes east for dissolution was sufficient for approval.
	Dissolution was approved by the shareholders through voting groups.
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:
	The number of votes cast for dissolution was sufficient for approval by
	(voting group) (voting group) (Voting group)
	(voting group)
	SET I
	FS 32
	Signature: 6 Cruz
	(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)
	ESTELA M. CRUZ.
	(Typed or printed name of person signing)
	PRESIDENT .
	(Title of person signing)