Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

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Account Name : ACCOUNTANT & MANAGEMENT INC

Account Number: I:0110000070

Phone

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DISSOLUTION OR WITHDRAWAL AGROPECUARIA SANTA INES, S.A.

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11/1d/2011/4:40/PM

TO: Amendment Section

Division of Corporations

H110002727843

COVER LETTER

SUBJECT: AGROPECUARIA SANTA IN	ES, S.A.
DOCUMENT NUMBER: P11000047490	
The enclosed Articles of Dissolution and fee are sub	omitted for filing.
Please return all correspondence concerning this mat	ter to the following:
JUAN ALBER	
(Name of Contact P	erson)
ACCOUNTANT & MANAGEMENT	
(Firm/Compar	ny)
1549 NE 123RD ST	•
(Address)	
NORTH MIAMI, FL 33161	
(City/State and Zip	Code)
For further information concerning this matter, pleas	e call:
	305 433-7945
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certifi	5 Filing Fee & S52.50 Filing Fee, ed Copy Certificate of Status & conal copy is Certified Copy (Additional copy is enclosed)
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 Tallahassec, FL 32301

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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 Sta			
	AGROPECUARIA SANTA INES, S.A.			
SECOND:	The document number of the corporation (if known): P11000047490			
THIRD:	The date dissolution was authorized: 11/15/11			
	Effective date of dissolution if applicable: (no more than 90 days after dissolution)	on 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 dissolution		
	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			
	(voting group)			
	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)			
	MONICA E MS ROMERO			
	(Typed or printed name of person signing)			
	PRESIDENT			
	(Title of person signing)			

Filing Fee: \$35

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