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R. WHITE

COVER LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: Dissolution of Corporation
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Dr. Blake ZiKa (Name of Contact Person)
(Firm/Company)
• • •
1728 Amberwynd circle Ul. (Address)
Palmetto, FL 34221 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (941) 981. 5898 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee Secretificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Secretified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: STREET ADDRESS:
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

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:		
	SieluKaia Inc.		
SECOND:	The document number of the corporation (if known):		
THIRD:	The date dissolution was authorized: 0 27 2015		
	Effective date of dissolution if applicable: 02 01 2015 (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 cast 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)		
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 redeiver, trustee, or other court appointed fiduciary, by that fiduciary)		
	Blake Zika		
	(Typed or printed name of person signing)		
	President		
	(Title of person signing)		

Filing Fee: \$35