## P11000086009

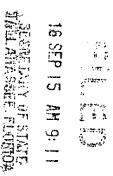
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 10, 2016

KELMY CABRITTA OR MARISOL GONZALEZ MKINNOVATION DESIGN CORP. 2701 SUNRISE LAKES EAST DR., APT. 202 SUNRISE, FL 33322

SUBJECT: MKINNOVATION DESIGN CORP.

Ref. Number: P11000086009

We have received your document for MKINNOVATION DESIGN CORP., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

If the dissolution was approved by the shareholders and if voting by voting groups was required, a statement that the number cast for dissolution was sufficient for approval must be separately provided for each voting group entitled to vote separately on the dissolution. The name(s) of each voting group(s) should be indicated.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6050.

Darlene Connell Regulatory Specialist III

Letter Number: 116A00016871

## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: Dissolution of Con	ypany Conpany Closed	
DOCUMENT NUMBER: PILO	200086009	
The enclosed Articles of Dissolution and fe	e are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
EMY CASE (Name of C	Contact Person)	
- B- MK JAWOV	Ation Design. (Company)	
(Firm	/Company)	
2701 SUNPITELAKES	EAST DAVE APT 202	
(Add State of City/State	dress)	
= -00MMVE, 41 900	a and 7 in Code)	
For further information concerning this matt	er, please call:	
MANISOL GOVENLER	at (954.6409570.	
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amoun	it:	
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS: Amendment Section	STREET ADDRESS: 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:  MK INNOVATION DETEN CORP.
	ME ANNUATION DELISA CONT.
SECOND:	The document number of the corporation (if known): PUCOOPECO9
THIRD:	The date dissolution was authorized: 10/31/2015
	Effective date of dissolution <u>if applicable</u> :  (no more than 90 days after dissolution file date)
	Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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)
	Signature:  (By a director, president or other officerl- 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)
	(Typed or printed name of person signing)
	(1 yped of printed name of person signing)

(Title of person signing)