Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

: ACCOUNT BOOKKEEPING CORP Account Name

Account Number : 120120000055 Phone

: (407)898-1757

Fax Number

: (407)897-5336

DISSOLUTION OR WITHDRAWAL CS BRAZIL STORE CORP

| Certificate of Status | |
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| Certified Copy | |
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C. CARROTHERS

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COVER LETTER

| TO: Amendment Section Division of Corporations | | |
|--|----------------------------|--|
| SUBJECT: CS BRAZIL STO | ORE CORP | |
| DOCUMENT NUMBER: P11000 | 100944 | |
| The enclosed Articles of Dissolution and f | | g. |
| Please return all correspondence concerning | | |
| Ticase retain an correspondence concerning | g this matter to the tonev | ving. |
| ANDRE | EA PINE | |
| (Name of | Contact Person) | |
| * AB | K CORP | |
| (Firr | n/Company) | |
| 3300 S HIAWA | SSEE RD ST | E 106 |
| (A | ddress) | |
| ORLAND | O FL 32835 | |
| (City/Sta | te and Zip Code) | |
| For further information concerning this ma | tter, please call: | |
| ANDREA PINE | at (_407) | 898-1757 |
| (Name of Contact Person) | (Area Code & | Daytime Telephone Number) |
| Enclosed is a check for the following amou | int: | |
| ■ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status | | Certificate of Status & |
| MAILING ADDRESS: | | EET ADDRESS: |
| Amendment Section Division of Corporations | - | ndment Section sion of Corporations |
| P.O. Box 6327 | Clift | on Building |
| Tallahassee, FL 32314 | 2661 | Executive Center Circle |

Tallahassee, FL 32301

415000230163

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; CS BRAZIL STORE CORP | | |
|---------|---|--|--|
| SECOND: | * | | |
| THIRD: | The date dissolution was authorized: 10/22/2014 | | |
| | Effective date of dissolution if applicable: | | |
| 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 | | |
| | (voling group) | | |
| | Signature: | | |
| | (By a director, president of 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) | | |
| | CRISTIANE DE SOUZA | | |
| | (Typed or printed name of person signing) | | |
| | PRESIDENT | | |
| | (Title of person signing) | | |