## P1200001614

(Re	questor's Name)	
·	•	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
	•	•
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
•	<del>-</del>	<del> </del>
Special Instructions to	Filing Officer:	
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05/07/13--01011--012 \*\*35.00



MAY 0 9 2019 T. ROBERTS TO: Amendment Section

## **COVER LETTER**

Division of Corporations
SUBJECT: ARTECLES OF DESSOLUTEON
DOCUMENT NUMBER: P1200000/614
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
AGUSTIN WOS QUEICH (Name of Contact Person)
(Name of Contact Person)  (Name of Contact Person)  (Synthyphymics DUL Intertainment Tree  (Firm/Company)
4900 Covershill St.
(Address)
Cacca, Flancha 32927
For further information concerning this matter, please call:
(Name of Contact Person) at (301) 712-8228  (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\times \$43.75 Filing Fee & Certificate of Status \$\times \$ (Additional copy is enclosed) \$\times \$43.75 Filing Fee & 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

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

,	ARTICLES OF DISSOLUTION •		
Pursuant to of dissolution	1/RY - 7 o.		
FIRST:	The name of the corporation as currently filed with the Florida Department of State:  DUL BUTEINTHIN WENT, TWC.		
SECOND:	The document number of the corporation (if known): P1200001614		
THIRD:	The date dissolution was authorized: 01/01/2013		
	Effective date of dissolution if applicable: //www.lynlly.  (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			
	MOSAUPLAND (voting group)		
	Signature:  (By a director, president or other officer - if directors or officers have not been selected, by an incompositor - if in the hands of a receiver; trustee, or other count appointed fiduciary, by that fiduciary)		
	(Typed or printed name of person signing)		
	PRESIDENT. (Title of person signing)		

Filing Fee: \$35

## **Notice of Corporate Dissolution**

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407. F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Name of Corporation: DUL. Intertalnment, Inc. Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00