number	ease print this page and use it as a cover sheet. Typ (shown below) on the top and bottom of all pages of t	e the fax audit he document.
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To:	Division of Corporations Fax Number : (850)617-6380	14 SEP
From:	Account Name : LAZARUS CORPORATE FILING SER Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944	N F
	DISSOLUTION OR WITHDRAWAL	36 115 101
14 SEP 23 PH 3: 23 UUDAANA HI OL STAFE DIVISION OF CORPORATIONS TALLARASSEF, FLORIDA	ROPY, INC.Certificate of Status0Certified Copy0Page Count02Estimated Charge\$35.00	
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ARTICLES OF DISSOLUTION	j,
ursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the line of dissolution:	:0 MA 9
IRST: The name of the corporation as currently filed with the Florida Department of Sta	പ ജെ:
ROPY INC.	
ECOND: The document number of the corporation (if known): <u>P1200001(057</u>	2_
HIRD: The date dissolution was authorized:9/23/2014	
Effective date of dissolution if applicable: (no more than 90 days after dissolution file d	ate)
OURTH: Adoption of Dissolution (CHECK ONE)	
Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.	ЪГ
Dissolution was approved by the shareholders through voting groups.	
The following statement must be separately provided for each voting group entiti to vote separately on the plan to dissolve:	ed
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) Terrs E. Prenzy, (Typed or primted name of person signing)	
(Typed or printed name of person signing)	
Presime	
(Title of person signing)	
Filing Fee: \$35	
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