Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H120002970583)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC

Account Number : I2000000019

: (305)552-5973

Fax Number

: (305)220-1440

DISSOLUTION OR WITHDRAWAL

MIA'S FROZEN YOGURT CORP.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

C. MUSTAIN

H12000297058 ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

ETD CT.	The many of the game action or assembly filed with the Floride Demostrature of	State.
FIRST	The name of the corporation as currently filed with the Florida Department of	State:
	MLAS FROTEN YOGURT CORP.	
SECOND:	The document number of the corporation (if known): P1200033	18/
THIRD:	The date dissolution was authorized: 12 19 12	777
	Effective date of dissolution if applicable: (no more than 90 days after dissolution f	Se change and
FOURTH:	Adoption of Dissolution (CHECK ONE)	ESSE CHESSE 61.C
	Dissolution was approved by the shareholders. The number of votes cast f was sufficient for approval.	or dissolution
	Dissolution was approved by the shareholders through voting groups.	是有 23
	The following statement must be separately provided for each voting group en to vote separately on the plan to dissolve:	ntitled
	The number of votes cast for dissolution was sufficient for approval by	
	(voting group)	
	h	
	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)	
•	LEONANDO PENINO	
	(Typod or printed name of person signing)	
	Passident	#
	(Title of person signing)	

Filing Fee: \$35