(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(, ·,				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





500256910935

02/28/14--01024--017



2/3/14

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** SUBJECT: VISUAL DESIGN CONSULTANTS, CORP. DOCUMENT NUMBER: P12000045525 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **ARIEL FABIUS** (Name of Contact Person) VISUAL DESIGN CONSULTANTS, CORP. (Firm/Company) 18459 PINES BLVD. STE. 279 (Address) PEMBROKES PINES, FL 33029 (City/State and Zip Code) For further information concerning this matter, please call: ARIEL FABIUS (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: ■\$35 Filing Fee ■\$43.75 Filing Fee & ■\$43.75 Filing Fee & ■\$52.50 Filing Fee, Certificate of Status Certificate of Status & Certified Copy (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section Amendment Section **Division of Corporations Division of Corporations** 

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

## ARTICLES OF DISSOLUTION FILED

Pursuant to sections 607.1403, Florida Statutes, this Florida province for submits the following articles of dissolution:

FIRST: The name of the corporation is:

## VISUAL DESIGN CONSULTANTS, IN C.

P12000045525

SECOND: The date dissolution was authorized: 12/31/2013

**THIRD:** 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 vote of 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 v	was sufficient fo	r approval by
(voting group	)		

Signed this 14 day of February, 2014

Signature

OR.

(By the Chairman or Vice Chairman of the Board, President, or other officer)

Name
PRESIDENT
Title