Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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.

(((H13000210461 3)))



H130002104813ABCS

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

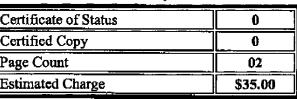
From:

Account Name : FONSECA & ASSOCIATES, INC

Account Number : I20100000066 Phone : (786)514-3837

Fax Number : (305)223-1156

DISSOLUTION OR WITHDRAWAL ABATICA, INC.



RECEIVED
13 SEP 20 PM 4: 09

Electronic Filing Menu

Corporate Filing Menu

Help

13 SEP 20 PM 3: 4:

H13000210,4613

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: ABATICA, INC.	
SECOND:	The document number of the corporation (if known): P12000046504	
THIRD:	The date dissolution was authorized: 09/09/2013	
	Effective date of dissolution if applicable: (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.	o n
	☐ 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	#2
	(voting group)	SECRETAR VISION OF C
	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 fiduoistry, by that fiduciary)	OF STATE
	ANMARY C PETCOVICH	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

Filing Fee: \$35