

**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.**

(((H14000119495 3)))



H140001194953ABC1

**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 : I20000000019  
 Phone : (305) 552-5973  
 Fax Number : (305) 220-1440

**DISSOLUTION OR WITHDRAWAL**  
**AEN COPIER INC**

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

RECEIVED

14 MAY 20 PM 4:36

STATE  
 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

14 MAY 20 AM 10:51

APPROVED  
 AND  
 FILED

Electronic Filing Menu

Corporate Filing Menu

**GLEWIS**  
 MAY 21 2014  
 EXAMINER

03/31/2032 04:10

05/02/2014 11:35

3058221891

MRA

H14000119495

APPROVAL  
AND  
FILED  
#4883 P. 002/002

PAGE 02

14 MAY 20 AM 10:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 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:

AEN COPIER INC

SECOND: The document number of the corporation (if known):

P12000048305

THIRD: The date dissolution was authorized:

05/20/2014

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.


☐ 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

(voting group)

Signature:

  
(By a director, president or other officer - if directors or officers have not been elected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

GINA QUINCENO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

APPROVAL  
AND  
FILED

14 MAY 20 AM 10:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H14000119495