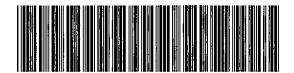
P13000001977

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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R. WHITE

COVER LETTER

Division of Corporations	
SUBJECT: MISU FOOD MART, INC.	
DOCUMENT NUMBER: P13000001977	
The enclosed Articles of Dissolution and	fee are submitted for filing.
Please return all correspondence concernin	g this matter to the following:
Anwar Hossain	
(Name of	Contact Person)
MISU FOOD MART, INC.	
(Fire	m/Company)
1419 Celery Avenue	
(A	address)
Sanford, FL 32771	·
(City/Sta	ate and Zip Code)
For further information concerning this ma	atter, please call:
Anwar Hossain	at ((321) 946-1638
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amou	unt:
\$35 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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: MISU FOOD MART, INC.					
SECOND:	The document number of the corporation (if known):					
THIRD:	The date dissolution was authorized: 04/30/2016					
	Effective date of dissolution if applicable: 04/30/2016 (no more than 90 days after dissolution file date)					
	Note: If the date inserted in this block does not meet the applicable statutory filing requirement be listed as the document's effective date on the Department of State's records.			will		
FOURTH:	Adoption of Dissolution (CHECK ONE)					
	Dissolution was approved by the shareholders. The number of votes east was sufficient for approval.	for dis	soluti	on		
	☐ Dissolution was approved by the shareholders through voting groups.					
	The following statement must be separately provided for each voting group of to vote separately on the plan to dissolve:	entitled ES	<u>ක</u>			
	The number of votes cast for dissolution was sufficient for approval by	を変えている。	AUG-I P	21 Man		
	(voting group)		12:24			
	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)			_		
	Anwar Hossain					
	(Typed or printed name of person signing)					
	President					
	(Title of person signing)			_		

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

lame of Corporation:
Date of dissolution will be the date the dissolution is filed with the Department of State or as pecified in the Articles of Dissolution.
Description of information that must be included in a claim;
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
419 Celery Avenue
Sanford, FL 32771
claim against the above named corporation will be barred unless a proceeding to enforce the claim is commence within 4 years after the filing of this notice.
Anwar Hossain
Printed Name of the Person Filing Signature of the Description