P/3000020580

(Re	questor's Name)	
(Ad	dress)	•
(Ad	dress)	
(Cit	y/State/Zip/Phone	⇒#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: DISSOWNON	
DOCUMENT NUMBER: 813000	02050
The enclosed Articles of Dissolution and f	ee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
CYNTHIA A. KRIPOS	
(Name of ADELAIDE'S ANGELS (Firm	Contact Person)
1580 NW 102 AD DN	
1580 NW 102 HO DR (A)	ddress) A. 33071
	te and Zip Code)
For further information concerning this mat	tter, please call:
(Name of Contact Person)	at (954 649.4002
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amou	int:
\$35 Filing Fee \$\sum \$43.75 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	STREET ADDRESS: Amendment Section
Amenament Section Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building 2661 Executive Center Circle
Tallahassee FL 32314	Zod i 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:		
	ADELAIDE'S ANGELS, Inc.		
SECOND:			
THIRD:	The date dissolution was authorized: 3/7/L		
	Effective date of dissolution if applicable: 3/7/16		
	(no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.		
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		
	Cyrolia Krieto		
	(voting group)		
	Carolle & Dec Des		
	Signature: (By Adirector, 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)		
	CYNTHIA A. KRIDOS		
	(Typed or printed name of person signing)		
PRESIDENT			
	(Title of person signing)		