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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

JAN 15 2014

R. WHITE

**DISSOLUTION OR WITHDRAWAL
SUMMIT DISTRIBUTORS CORP**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

FILED
14 JAN 14 PM 11:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

14 JAN 14 PM 5:09

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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H14000010658
ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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:
SUMMIT DISTRIBUTORS CORP

SECOND: The document number of the corporation (if known): P13000064281

THIRD: The file date of the articles of incorporation: 08/02/2013

FOURTH: (CHECK AT LEAST ONE BOX)

- ☒ None of the corporation's shares have been issued.
- ☒ The corporation has not commenced business.

FIFTH: No debt of the corporation remains unpaid.

SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

- ☐ A majority of the incorporators authorized the dissolution.
- ☒ A majority of the directors authorized the dissolution.

Signature: Luis Perez 01-14-14
(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.)

LUIS A PEREZ

(Typed or printed name of person signing)

DIRECTOR

(Title of Person Signing)

Filing Fee: \$35

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 JAN 16 AM 11:24

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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.

SUMMIT DISTRIBUTORS CORP

Name of Corporation: _____

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified 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)

SUMMIT DISTRIBUTORS CORP

6800 SW 40 ST - SUITE 401

MIAMI, FL 33155

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A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

LUIS A PEREZ

Printed Name of the Person Filing

Luis Perez
Signature of the Person Filing
01-14-14

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00

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