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(Re	equestor's Name)	
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(Ci	ty/State/Zip/Phone	· #)
PICK-UP	MAIT WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

subject: Disso	lution	******
DOCUMENT NUMBER: P3	0000 643 67	
The enclosed Articles of Dissolution and	fee are submitted for filing	3 .
Please return all correspondence concerning	ng this matter to the follow	ring:
Lissette N (Name of	Tendez Contact Person)	
En bra Solutions Inc. (Firm/Company)		
	-th St Apt Z	
Miami F-/ (City/Sta	33/30 ate and Zip Code)	
For further information concerning this ma	atter, please call:	
(Name of Contact Person)	at (<i>78 6</i>) <u>\$</u> (Area Code &	7/8 - 600/ Daytime Telephone Number)
Enclosed is a check for the following amou	unt:	
□ \$35 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:		ET ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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:
	Embra Salutions Inc.
SECOND:	The document number of the corporation (if known): 10/3000 64367
THIRD:	The file date of the articles of incorporation: $8-1-13$
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 incorporators authorized the dissolution. A majority of the directors authorized the dissolution.
Sign	ature: Lissette Benday
	(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.)
	(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. Embra Solutions Inc. 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) 1039 SW 5th St Apt 1101 Miani, Fl 33/30 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.

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