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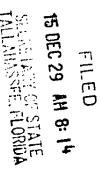
(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number))
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer.	

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Durdution of Company
DOCUMENT NUMBER: <u>₽14 0000 35214</u>
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
LUMINA MOBILE INC
(Firm/Company) . 1132 5 Power Poor (Address)
City/State and Zip Code)
For further information concerning this matter, please call:
Carla Klimbing at (954) 805-8925 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\to\$ \$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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:		
	LUMINA MOBILE INC		
SECOND:	The document number of the corporation (if known):		
THIRD:	The date dissolution was authorized: $\frac{12/10/15}{12/10/15}$		
	Effective date of dissolution if applicable: $12/(0/15)$		
	(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		
	ONLY ME PRESIDENT FE		
	(voting group)		
	SSLEE C		
	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, trastee, or other court appointed fiduciary, by that fiduciary)		
	CARLA R KLETNUBING (Typed or printed name of person signing)		
	(1 yped of printed name of person signing)		
	PRESIDENT		
	(Litle at nersan signing)		