## P14000044816

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone#	)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name	
(Document Number)		
Certified Copies	_ Certificates of	Status
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09/18/14--01013--011 \*\*43.75

14 SEP 18 PH12: 28

EFFECTIVE DATE

10.01.2014

ALL DISSILLS

10.01.2014

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Corporate Dissolution	
DOCUMENT NUMBER: P14000044816	·
The enclosed Articles of Dissolution and fee are submitted	for filing.
Please return all correspondence concerning this matter to the	he following:
DARLENNE ALONSO	
VP (Name of Contact Person)	
(Firm/Company)	
7745 HARDING AVE # 17	(1) (2)
(Address) MIAMI BEACH, FL 33141	·
(City/State and Zip Code	)
For further information concerning this matter, please call:	
DARLENNE ALONSO at (305	710-0446  a Code & Daytime Telephone Number)
,	a Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status Certified Cop (Additional coenclosed)	•
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

EFFECTIVE DATE

## 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:  AXIS MULTISERVICES CORP				
SECOND:	• • • • • • • • • • • • • • • • • • • •				
THIRD:	The date dissolution was authorized: 09/16/2014				
	Effective date of dissolution if applicable: 10/01/2014  (no more than 90 days after dissolution for the second days)	ile date)			
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				
	(voting group)	S 4.			
	Signature:  (By a director, president or other officer - if directors or officers have not been selected, by	14 SEP 18 PM 12: 2			
	an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	<b>8</b>			
	DARLENNE ALONSO				
	(Typed or printed name of person signing)	•			
	VP				
	(Title of person signing)				

Filing Fee: \$35