

P14000100614

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

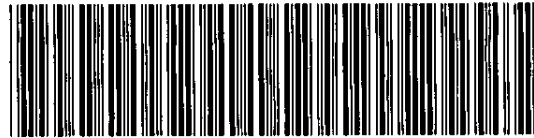
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TO ACKNOWLEDGE
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15 MAY 12 AM 9:50

STATE
TALLAHASSEE
FLORIDA

CRM
5-13-12

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

FILED
15 MAY 12 AM 9:50
TALLAHASSEE, FLORIDA

ACCOUNT NO. : I20000000195

REFERENCE : 591160 8026135

AUTHORIZATION

Lydia Cohen

COST LIMIT : \$ 35.00

ORDER DATE : April 15, 2015

ORDER TIME : 8:34 AM

ORDER NO. : 591160-010

CUSTOMER NO: 8026135

DOMESTIC FILINGS

NAME: VEGA REAL INC.

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lydia Cohen - EXT# 62974

EXAMINER'S INITIALS: _____

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
VEGA REAL INC.

SECOND: The document number of the corporation (if known): **P14000100614**

THIRD: The date dissolution was authorized: **March 1, 2015**

Effective date of dissolution if applicable: _____
(no more than 90 days after dissolution file 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)

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, trustee, or other court appointed fiduciary, by that fiduciary)

Sonia Vega

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35