## Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : JELEN ACCOUNTING SERVICES, INC

Account Number : I20120000052

Phone

: (305)591-9180

Fax Number

: (305)591-9167

## DISSOLUTION OR WITHDRAWAL PALMA CONSOLIDATED, INC

Certificate of Status	0
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OCT 28 2015

C. CARROTHERS

## 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:  PALMA CONSOLIDATED, INC.	
SECOND:	The document number of the corporation (if known):	
THIRD:	The date dissolution was authorized: 10/13/2016	•
	Effective date of dissolution if applicable:    10/13/2016	٠.
	Note: If the date inserted in this block does not meet the applicable stantory filing requirements, this date, not be listed as the document's effective date on the Department of State's records.	γil
FOURTH:	Adoption of Dissolution (CHECK ONE)	
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.	<b>)</b>
	☐ 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	
		<b></b>
	(voting group)	
	Signature: X	_
	(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)	
	PABLO PALMA	
	(Typed or printed name of person signing)	•
	PUESIDENT	
	(Title of person signing)	-