P16000006385

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THE THE STATE OF STAT

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: SOFLO BISTRO			
DOCUMENT NUMBER:	P16000006385		
The enclosed Articles of Di	ssolution and f	ce are submitted for filing	ļ.
Please return all correspond	ence concerning	g this matter to the follow	ing:
ANA E SWINK			
	(Name of	Contact Person)	
	(F:	(6)	
1735 24TH AVE	(Firn	n/Company)	
	(A	ddress)	
VERO BEACH, FL 32960			
	(City/Sta	te and Zip Code)	
For further information con-	cerning this ma	tter, please call:	
ANA E SWINK		at (^{772) 473-1782}	
(Name of Contact	Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the	ollowing amou	nt:	
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Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: SOFLO BISTRO, INC.			
SECOND:	The document number of the corporation (if known):			
THIRD:	The date dissolution was authorized:			
	Effective date of dissolution if applicable:			
	(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:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation $\boldsymbol{\epsilon}$			
	Signature: & Aurul			
	(By a director, president or other officer - it 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)			
	ANA E SWINK			
	(Typed or printed name of person signing)			
	PRESIDENT			
	(Title of person signing)			

Filing Fee: \$35