1/20/2017

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170000188523)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: EXPRESS CORPORATE FILING SERVICE INC.

Account Number: I20000000146

Phone

(305)444-4994

Fax Number

: (305)444-4977

DISSOLUTION OR WITHDRAWAL AM QUARTZ & GRANITE CORP

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

ectronic Filing Menu

Corporate Filing Menu

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: AM QUARTZ & GRANITE CORP	
SECOND:	The document number of the corporation (if known):	
THIRD:	The date dissolution was authorized: 01/18/2017	
	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 stanutory 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	
	(voting group)	
	Gignature: (By a director sessident 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)	
	ANGEL MANUEL LEYVA SUAREZ	
•	(Typed or printed name of person signing)	
,	P	
•	(Title of person signing)	