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PICK-UP	WAIT	MAIL
(Bu	isiness Entity Name	) -
(Document Number)		
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SECRETARY OF STATE

C. GOLDEN

JUL - 6 2018

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Dissolve Company SUBJECT:		
DOCUMENT NUMBER: P17000028798		
The enclosed Articles of Dissolution and f	fee are submitted for filin	g.
Please return all correspondence concernin	g this matter to the follow	ving:
Sridhar Janakiraman		
(Name of	Contact Person)	
lyer Granite, Inc		
(Fir	m/Company)	
3202 Hartford Way		
(A	Address)	
Matthews, NC 28104		
(City/Sta	ate and Zip Code)	
For further information concerning this ma	atter, please call:	
Sridhar Janakiraman	704-839-1265 at (	
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amo	unt:	
■ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:	STREET ADDRESS:	
Amendment Section	Amendment Section	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

FILEL

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles 2018 JUL -2 PM 12: 56 of dissolution: SECRETARY OF STATE The name of the corporation as currently filed with the Florida Department AHAGEE FLORIDA FIRST: Iyer Granite, Inc. The document number of the corporation (if known): SECOND: The date dissolution was authorized: \_\_\_\_ THIRD: 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. Adoption of Dissolution (CHECK ONE) FOURTH: 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) Sridhar Janakiraman (Typed or printed name of person signing)

(Title of person signing)

President

## Filing Fee: \$35

## Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not requi	red when filing a voluntary dissolution.
Name of Corporation:	
Date of dissolution will be the date the dissolution is filed with the specified in the Articles of Dissolution.	Department of State or as
Description of information that must be included in a claim:	
	<del></del>
Mailing address where claims can be sent: (Claims cannot be sent	to the Division of Corporations)
Maning address where claims can be sent. (Claims cannot be sent	to the Broton or Corporation,
A claim against the above named corporation will be barred unles within 4 years after the filing of this notice.	s a proceeding to enforce the claim is commenced
Sridhar Janakiraman	E LAM
Printed Name of the Person Filing	Signature of the Person Filing