

P17000084044

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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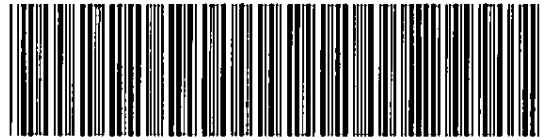
(Business Entity Name)

(Document Number)

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COUNTY OF STATE  
TALLAHASSEE, FLORIDA



115 N CALHOUN ST., STE. 4  
TALLAHASSEE, FL 32301  
866.625.0838  
COGENCYGLOBAL.COM

Date: November 3, 2017

Account#: 1200000000088

Name: Marisa Kugelman

Reference #: T013047

Entity Name: ZEUS SECURITIES, INC.

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☒ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other \_\_\_\_\_

Authorized Amount: \$35.00

Signature: Marisa Kugelman

• CORPORATE HQ  
COGENCY GLOBAL INC.  
10 E 40 ST, 10 FL  
NY NY 10016  
800.221.0102  
+1.212.947.7200

• EUROPEAN HQ  
COGENCY GLOBAL (UK) LIMITED  
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## 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:  
Zeus Securities, Inc.

SECOND: The document number of the corporation (if known): P17000084044

THIRD: The date dissolution was authorized: November 2, 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 statutory 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)

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)

Vincent Butkevits

\_\_\_\_\_  
(Typed or printed name of person signing)


President

\_\_\_\_\_  
(Title of person signing)

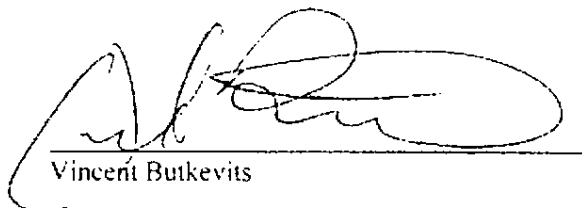
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17 NOV -3 AM 10:01  
TALLAHASSEE, FLORIDA

**IN WITNESS WHEREOF**, the undersigned have executed this Consent as of the date first written hereinabove.

**DIRECTOR:**

  
\_\_\_\_\_  
Vincent Butkevits

IN WITNESS WHEREOF, the undersigned have executed this Consent as of the date first written hereinabove.



Vincent Butkevits