

P1800008304

04/12/2019

14:52

3052201440

LAZARUS CORPORATE

PAGE 01/02

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

((H19000121741 3)))



H190001217413ABC-

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 : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

**DISSOLUTION OR WITHDRAWAL
MARACUMIX CORP**

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

ART DK

APR 15 2019

I ALBRITTON

RECEIVED

2019 APR 12 PM 3:45

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

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:

MARACUMIX CORP

SECOND: The document number of the corporation (if known): P18000083045

THIRD: The date dissolution was authorized: 4/12/19

Effective date of dissolution if applicable: _____

(no more than 90 days after dissolution file date)

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)

MARIAN MARTINEZ BARRIOS

(Typed or printed name of person signing)

VP

(Title of person signing)

Filing Fee: \$35

2019 APR 12 AM 8:49

FILED