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| (Requestor's Name) | |
|---|--------------|
| (Address) | |
| (Address) | |
| (City/State/Zip/Phone #) | - |
| PICK-UP WAIT | MAIL |
| (Business Entity Name) | |
| (Document Number) | <u></u> |
| Certified Copies Certificates of Statu | es |
| Special Instructions to Filing Officer: | |
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Office Use Only



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TRANSMITTAL LETTER

| то: | Amendment Section Division of Corporations |
|-------------|---|
| SUBJ | ECT: DISSOLUTION of SOBO CABONA, INC |
| DOCU | JMENT NUMBER: |
| The en | aclosed Articles of Dissolution and fee are submitted for filing. |
| Please | return all correspondence concerning this matter to the following: |
| | JAMES J. TYPREZU (Name of Person) |
| | (Name of Person) |
| | SOBE CABANA, INC. 1990 (Name of Firm/Company) |
| | (Name of Firm/Company) |
| | 4471 Actor Ro (Address) |
| | |
| | MIAMI BOACH FC 33140 (City/State/and Zip Code) |
| | (City/State/and Zip Code) |
| For fu | rther information concerning this matter, please call: |
| | Mark the second of the second |
| | (Name of Person) (Area Code & Daytime Telephone Number) |
| | (Name of Person) (Area Code & Daytime Telephone Number) |
| Enclos | sed is a check for the following amount: |
| \$35 | Filing Fee (\$\frac{1}{2}\\$43.75 Filing Fee & Certificate of Status (Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certificate of Status & Certified Copy (Additional copy is enclosed) |
| / \ | MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 |

of dissolution: FIRST: The name of the corporation as currently filed with the Department of State: SORE CABANA INC. SECOND: The document number of the corporation (if known): The date dissolution was authorized: ___ THIRD: Effective date of dissolution if applicable: 12-(no more than 90 days after dissolution file date) 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 of 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 Signed this Signature (By a director, president or other officer an directors or officers have not been selected, by an incorporatorif in the hands of a receiver, trustee, of other court appointed fiduciary, by that fiduciary) consequences and a consequence of the last of (Typed or printed name of person signing)

ac Sourchorders through a management. 40 Add Governing in 18 (Title of person signing) 444 1 44 . Filing Fee: \$35

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles

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