

Division of Corporations Public Access System

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.

(((H08000021419 3)))



H0800000214193ABCZ

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

: CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone

: (850)521-1000

Fax Number

: (850)558-1575

DISSOLUTION OR WITHDRAWAL

GENOWA GP, INC.

Certificate of Status 0 Certified Copy 1 02 Page Count \$43.75 Estimated Charge

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:

	The familie of the composition o
	Genowa GP, Inc.
COND:	The document number of the corporation (if known): P94000047366
IRD:	The date dissolution was authorized:
	Effective date of dissolution if applicable: (no mere than 90 days ofter dissolution file date)
OURTH:	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 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
	(voting group)
	Signature: AN 2
	(By a director, president or other officer - if directors or officers have not been selected, by an inecurporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	Charles Blume
	(Typed or printed name of person signing)
	Secretary

Filing Fee: \$35

(Title of person signing)