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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: APTICLES OF DISSOLUTION	
DOCUMENT NUMBER:	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
MARLA T. BECK	
(Name of Contact Person)	
· · · · · · · · · · · · · · · · · · ·	
(Firm/Company)	
ZOGBB SOLANO WAY (Address)	
BOCA RATON FL 33433 (City/State and Zip Code)	
For further information concerning this matter, please call:	
MARLA T. BECK at (561) 479-1055 (Name of Contact Person) (Area Code & Daytime Telephone Number)	
(Name of Contact Person) (Area Code & Daytime Telephone Number))
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\bigs\sum \text{\$43.75 Filing Fee & } \Bigs\sum \text{\$43.75 Filing Fee & } \Bigs\sum \text{\$52.50 Filing Fee, } Certified Copy & Certificate of Status & Certified Copy &	
MAILING.ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

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:
	MNB MANAGEMENT, INC.
SECOND:	The document number of the corporation (if known): P500062316
THIRD:	The date dissolution was authorized: DECEMBER 31, 2009
	Effective date of dissolution if applicable: DECEMBER 31, 2009 (no more than 90 days after dissolution file date)
FOURTH:	Adoption of Dissolution (CHECK ONE)
Salaton. Go	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
Nibila	(voting group), FLORER CONTROL OF STATE OF STAT
	Signature: MM Belle
	(By a director president or other officers 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)
	President printed name of person signing)
	(Title of person signing)

Filing Fee: \$35