P96000013040

(Requestor's Name)		
(Address)		
(Address)		
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TO: Amendment: Section

COVER LETTER

Division of Corporations	
SUBJECT: LICHTI INC.	
DOCUMENT NUMBER: <u>P96000013040</u>	
The enclosed Articles of Dissolution and fee are subn	nitted for filing.
Please return all correspondence concerning this matte	er to the following:
HEIKE BUSBY	
(Name of Contact Per	rson)
ALLURE ACCOUNTING LLC	
(Firm/Company	()
3665 BONITA BEACH ROAD STE. 1-3	
(Address)	
BONITA SPRINGS, FL 34134	
(City/State and Zip	Code)
For further information concerning this matter, please	call:
MARENA LOEFFLER at (239 992-3355 (Area Code & Daytime Telephone Number)
	(Area Code & Daytinie Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certified	nal copy is 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:		
	LICHTI,INC.		
SECOND:	The document number of the corporation (if known): P96000013040		
THIRD:	The date dissolution was authorized: 05/20/2010		
	Effective date of dissolution if applicable: 05/20/2010	1-142	
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cast for was sufficient for approval.	or dissolution	n
	Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting group en to vote separately on the plan to dissolve:	titled	
	The number of votes cast for dissolution was sufficient for approval by		
		ا محمد	₹
	(voting group)	ال 🔞	SECRI
S	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)	JUN-7 AMII:52	ETARY OF STATE
	ANGELIKA LEHNER		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)		

Filing Fee: \$35