RAMOD DE BOUNTS





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P. O. Box 4471 • Hollywood, FL 33083

LICENSED AND INSURED C.C.N. #000017475

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TO: FLORIDA DEPARTMENT OF STATE,
FROM: RAMON MOTA OF RAMON REMODELING IN,
THIS LETTER IS TO STATE THAI I RAMON MOTA FROM RAMON REMODELING IN, AM WRITING THIS LETTER OFDISSOLUTION BEM THAT FOR THE LAST (3) THREE YEARS IHAVE NOT MADE ENOUGH PROFITS, TO BENE FIT ME IN MYCOMPANY, WHICH IS THE REASON WHY I REQUESTING TO CLOSE DOWN MY COMPANY, I HAVE NO DEBTS OWED TOTHE CORPORATION, THERE ARE NO SHARE HOLDERS INVOLVED IN THIS COMPANY, ANY QUESTIONS REGARDING THIS MATTERPLEASE CONTACT ME AT ABOVE NUMBER,

SINCERELY, RAMON MOTA,

DATE

130-11

OI JUN 12 AM 9: 08
SECRETARY OF STATE
TATE ANASSEE, FLORID

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 is: KAMON KEMO deLi	N9
TN	IC.	<u>J</u>
SECOND:	The date dissolution was authorized: JANUARY12, 2,001	
THIRD:	Adoption of Dissolution (CHECK ONE)	
Dis was	ssolution was approved by the shareholders. The number of votes cast for dissolution for approval.	lution
☐ Dis	ssolution was approved by vote of the shareholders through voting groups.	0 JU
	The following statement must be separately provided for each voting group antitled to vote separately on the plan to dissolve:	112 M 9
The	number of votes cast for dissolution was sufficient for approval by	9: 08
	(voting group)	
Sign	ned this $\frac{29}{2001}$ day of $\frac{A4}{1000}$, $\frac{2001}{1000}$.	
Signature _	Range moto	
_	(By the Chairman or Vice Chairman of the Board, President, or other officer)	
	KAMÓN MOTA	
	(Typed or printed name)	
	Director	
	(Title)	