## P960000086823

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<del>∍ #)</del>
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(Do	cument Number)	
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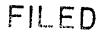
07 FEB 21 PM 3: 03
SECRETARY OF STATE

GA.

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Topride Corporation
DOCUMENT NUMBER: P96000086823
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Eduardo Rubin
(Name of Contact Person)
Topride Corporation
(Firm/Company)
2601 South Bayshore Dr #200
(Address)
Coconut Grove, FL 33133
(City/State and Zip Code)
For further information concerning this matter, please call:
Eduardo Rubin at ( 305 ) 857-0400
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\times \text{\$\subset\$\$\square\$\$\text{\$\square\$}\$\$ \$\text{\$\square\$\$\$\square\$\$\$\$ \$\text{\$\square\$}\$\$\$\$\$\$\$\$ \$\$\square\$
MAILING ADDRESS: STREET ADDRESS:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



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## ARTICLES OF DISSOLUTION

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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:
	Topride Corporation
SECOND:	The document number of the corporation (if known): P96000086823
THIRD:	The date dissolution was authorized: 12/31/06
	Effective date of dissolution if applicable: N/A  (no more than 90 days after dissolution file date)
FOURTH:	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 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:  (By a director, possident or other officer off director) or officers have not been selected, by an incorporator - if in the hands of a receiver, trustic, or other court appointed fiduciary, by that fiduciary)
٠	Eduardo Rubin
	(Typed or printed name of person signing)
	Director
	(Title of person signing)

Filing Fee: \$35

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