9700030358

| (Re | questor's Name) | |
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| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | MAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
| (Document Number) | | |
| Certified Copies | Certificates | of Status |
| Special Instructions to I | Filing Officer: | |
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Volos/madre

TRANSMITTAL LETTER

TO: Amendment Section

| Division of C | orporations | | |
|--|--|--|--|
| SUBJECT: | LAXMI | MANAGEM | ENT, INC |
| DOCUMENT NUMB | ER: P9700 | 00030358 | |
| The enclosed Articles | of Dissolution and fe | e are submitted for f | iling. |
| Please return all corresp | oondence concerning | this matter to the fo | llowing: |
| | A RVIND (Name of P | PATEL | |
| | (Name of 1 | cison) | |
| <u> </u> | (Name of F | irm/Company) | <u></u> |
| | 7701 Ur | VIVERSAL | BLVD. |
| | | (Address) | |
| _ | ORLANDO | , FLORIDA tate/and Zip Code) | 32819 |
| | (City/St | ate/and Zip Code) | |
| For further information | concerning this matt | er, please call: | |
| ARVIND | PATEL | at (407) | 313 - 4200 Daytime Telephone Number |
| (Narr | e of Person) | (Area Code & | & Daytime Telephone Number |
| Enclosed is a check for | the following amour | ıt: | |
| X\$35 Filing Fee □\$ Ce | 43.75 Filing Fee & Pertificate of Status | □ \$43.75 Filing Fee Certified Copy (Additional copy is enclosed) | & \$\sum \\$52.50 \text{ Filing Fee,} \\ Certificate of Status & \\ Certified Copy \\ (Additional copy is \\ enclosed) |
| MAILING AD Amendment S Division of Co P.O. Box 6327 Tallahassee, Flo | ection rporations | | STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 |

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 Department of State: |
|---------|---|
| IIIOI. | LAXMI MANAGEMENT, INC. |
| SECOND: | The document number of the corporation (if known): P9700030358 |
| THIRD: | The date dissolution was authorized: 10/1/03 |
| | Effective date of dissolution if applicable: 10/1/03 (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 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) |
| | Signed this |
| | |
| Signa | ture: |
| | (By a director, president or other officer - if directors or officers have not been selected, by an interpolator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) |
| | ARVIND PATEL |
| | (Typed or printed name of person signing) |
| | PRESIDENT/ DIRECTOR |
| | (Title of person signing) |

Filing Fee: \$35