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(Re	equestor's Name)		
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(Cir	ity/State/Zip/Phone	; #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	usiness Entity Nam	na)	
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(Dc	ocument Number)		
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filina Officer:		
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As: MOTICLE OF DISSILVEDON:

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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

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: Cu Ban Aut In	<u> </u>	
SECOND:	The date dissolution was authorized: /2- 27- 82		
THIRD:	Adoption of Dissolution (CHECK ONE)		
Diss was	solution was approved by the shareholders. The number of votes cast for di sufficient for approval.	ssolution	
Diss	solution was approved by vote of the shareholders through voting groups.		
	he following statement must be separately provided for each voting group ntitled to vote separately on the plan to dissolve:		
The	number of votes cast for dissolution was sufficient for approval by		
	(voting group)		
Sig	ned this 27 day of DECEMBER, 2007	, 	
Signature _	(By the Chairman or Vice Chairman of the Board, President, or other officer)		
	(Typed or printed name) PRESIDENT. (Title)	SECRETARY OF STATE TALLAHASSEE, FLORIC	FILED