(Re	equestor's Name)	
(Ad	idress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phon	e #)
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COYER LETTER

Division of Corporations
SUBJECT: DISSOLUTION OF CORPORATION
DOCUMENT NUMBER: P9700010 44-82
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JOHN J. SABOC (Name of Contact Person)
MXCOM, INC (Firm/Company)
(Firm/Company)
2015 W. STATE ROAD 434 (Address)
1 MIGUION EL 32779
LONGWOOD, FL 32779 (City/State and Zip Code)
For further information concerning this matter, please call:
——————————————————————————————————————
JOHN SABOL at (407) 435-2642 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)
MAJLING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, PL 32314 STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, PL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Plorida 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: MAXCOM, WC	
SECOND:	00 7000101110	
THIRD:	The date dissolution was authorized: /2-3(-/2	
	Effective date of dissolution if applicable; 12-31-12 (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)	ت
	13 JAN	NESO.
	Signature: (By a director, president or other briticar - If directors or officers have not been selected, by	CORPO
	that fiduciary) JOHN J. SABOC (Typed or printed name of person signing)	2 S S S S S S S
	•	
	V. PRESIDENT	
	(Title of person signing)	

Filing Fee: \$35