Paym Beach Cares, F7 City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 1	<u>Carolynne</u> Requ	F. Desimone Jestor's Name 4th Court, North Address	1547/	
1	Polm Be City/State/2	ach Gardens, F7 ip Phone #	_3348 Office Use Only	-
2	CORPORATION N	AME(S) & DOCUMENT NUM	MBER(S), (if known):	
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			Ninseletin-	. ~
5-1-			Dessolution 5-17 Examiner's Initials	1-4

ARTICLES OF DISSOLUTION

FILED 99 MAY 14 PM 4: 08

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: Th	ne name of the corporation is: Solis Gols Sourd Florisa
į So	UTNOW STATES, TMC.
SECOND: Th	ne date dissolution was authorized: Opeil 26, 1999
THIRD: A	doption of Dissolution (CHECK ONE)
	tion was approved by the shareholders. The number of votes cast for dissolution ficient for approval.
☐ Dissolu	tion was approved by vote of the shareholders through voting groups.
	following statement must be separately provided for each voting group led to vote separately on the plan to dissolve:
The nur	mber of votes cast for dissolution was sufficient for approval by
	(voting group)
Signed Signature	this <u>26</u> day of <u>Opsil</u> , 19 <u>99</u> .
Signature	(By the Chairman or Vice Chairman of the Board, President, or other officer)
-	CAROLYNIE F. DESIMONE (Typed or printed name)
	PRES'DEAT. (Title)
	\ <i>\</i>