

P98000055818

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

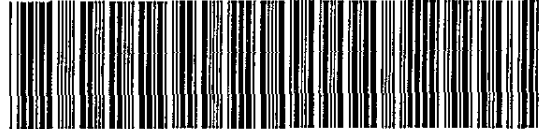
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Certified Copies _____

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FILED
03 APR 16 PM 2:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/16/03

April 13, 2003

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir or Madam:

Please find attached the Articles of Dissolution for Sheldon Suga & Associates, Inc.. I have closed the business and my mailing address is: 160 Spring Street NW, Atlanta, GA 30213. Phone: 404-661-0870. You will also find enclosed a check in the amount of \$43.75 which is the filing fee and the certificate of status.

Thank you for your attention to this matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'Sheldon Suga', written over a horizontal line.

Sheldon Suga
President

160 SPRING STREET NW
ATLANTA, GA 30213

ARTICLES OF DISSOLUTION

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

FILED
03 APR 16 PM 2:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation is: Sheldon Suga & Associates, Inc.

SECOND: The date dissolution was authorized: January 2, 2003

THIRD: 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 vote 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 13th day of April, 2003.

Signature _____

(By the Chairman or Vice Chairman of the Board, President, or other officer)

Sheldon Suga

(Typed or printed name)

President

(Title)