P98000081496

(Requestor's Name)			
(Ad	dress)		
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(Address)			
(Cit	y/State/Zip/Phone	⇒#)	
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11 APR -4 PH 12: 18
SECRETARY OF STATE
SALLAHASSEE, FLORID

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COVER LETTER

TO: Amendment Section

Division of Corporations			
0.510.50			
SUBJECT: Articles of Dissolu	otton		
DOCUMENT NUMBER: 6980000	<i>\\\</i>		
DOCUMENT NUMBER:			
The enclosed Articles of Dissolution and fee are	submitted for filing.		
Please return all correspondence concerning this matter to the following:			
Antonia Sale	orio		
(Name of Contact Person)			
Vortex wall Systems Inc. (Firm/Company)			
(Firm/Company)			
4392 NM 100th Ave.			
(Address)			
0	5 220 =		
Coral Springs Fl 33065 (City/State and Zip Code)			
(On), out of and	·		
For further information concerning this matter, please call:			
Antonio Salario	at (954) 294-6759		
(Name of Contact Person)	at (954) 294-6759 (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:			
■\$35 Filing Fee ■\$43.75 Filing Fee & ■\$4			
	rtified Copy Certificate of Status &		
	lditional copy is Certified Copy (Additional copy is		
en	closed) (Additional copy is enclosed)		
MAILING ADDRESS:	STREET ADDRESS:		
Amendment Section	Amendment Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327	Clifton Building		
Tallahassee FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

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 Florida Department of	of State:
	Vortex wall systems, Inc.	•
SECOND:	The document number of the corporation (if known): P98000081496	
THIRD:	The date dissolution was authorized: 13/31/10	
	Effective date of dissolution if applicable: 12/31/10 (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 was sufficient for approval.	for dissolution
	Dissolution was approved by the shareholders through voting groups.	
	The following statement must be separately provided for each voting group e to vote separately on the plan to dissolve:	ntitled
	The number of votes cast for dissolution was sufficient for approval by	11 APR SECRET
	(voting group)	AR)
	Signature:	APR -4 PH 12: 18 RETARY OF STATE AHASSEE, FLORIDA
	(By a discour, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	
	Antonio Salorio	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

Filing Fee: \$35