

P98000085762

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

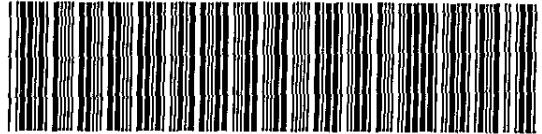
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/24

MAWUA Inc.

Division of Corporations
PO Box 6327
Tallahassee
Florida 32314

April 14, 2003

Dear Sir,

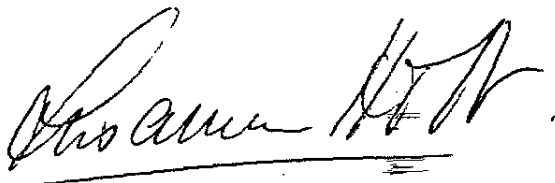
I enclose the form and fee to dissolve the corporation 'Mawua Inc'. I am the president of the corporation. I called your office today to state that I wished to dissolve the corporation.

The new mailing address for myself, as president of the corporation is the following

S Holt
PMB 230
2370 W Highway 89A
Suite 11
Sedona AZ 86336

My telephone numbers are on this letterhead.

Yours Sincerely,

A handwritten signature in dark ink, appearing to read 'Susanna Holt', written over a horizontal line.Handwritten initials or a signature enclosed in large parentheses, located to the right of the main signature.

Susanna Holt ARBS

Tel: 928-203-0142 • Fax: 928-203-0142 • cell: 928-300-7952 • E-mail: susannaholt@cs.com

Website: susannaholt.com

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: MANNA, Inc.

SECOND: The date dissolution was authorized: APRIL 14 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 14th day of April, 2003

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

SUSANNA HOLT
(Typed or printed name)

CHAIRMAN - PRESIDENT
(Title)