

(City, State, Zip) TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

OFFICE USE ONLY

CORPORATION NAME(S)	&	DOCUMENT NUMBER(S) (if known)	•
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(Phone #)

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(Corporation Name)		(Document #)	
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(Corporation Name)		(Document #)	0 00 0
Walk in Pick up time		Certified	Copy OCI 20
Mail out Will wait		Photocopy Certificate	OO OCT 20 MI IO 35 DIVISION OF CORFORATION Copy Cof Status
NEW FILINGS		AMENDMENTS	TION
Prolit	1 _L	Amendment	
NonProfit		Resignation of R.A., Officer/Director	
Limited Liability		Change of Registered Agent	
Domestication	X	Dissolution/Withdrawal	···
Other		Merger	

OTHER FILNGS		
	Annual Report	
	Fictitious Name	
	Name Reservation	

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
Trademark
Other

Examiner's Initials

ARTICLES OF DISSOLUTION

	AND MY SECOND
PURSUANT TO SUBITS THE F	O SECTION 607.1403, FLORIDA STATULES, THIS FLORIDA PROEIT CORNORATION FOLLOWING ARTICLES OF DISSOLUTION:
FIRST:	THE NAME OF THE CORPORATION IS:
	OLI INTL CORP.
SECOND:	THE DATE DISSOLUTION WAS AUTHORIZED:_09/01/2000
THIRD:	ADOPTION OF DISSOLUTION (CHECK ONE)
OF VO	SSOLUTION WAS APPROVED BY THE SHAREHOLDERS. THE NUMBER ITES CAST FOR DISSOLUTION WAS SUFFICIENT FOR APPROVAL.
* DI THROUGH	SSOLUTION WAS APPROVED BY VOTE OF THE SHAREHOLDERS VOTING GROUPS.
EACH DISSOLVE:	THE FOLLOWING STATEMENT MUST BE SEPRATELY PROVIDED FOR VOTING GROUP ENTITLED TO VOTE SEPRATELY ON THE PLAN TO
	E NUMBER OF VOTES CAST FOR DISSOLUTION WAS SUFFICIENT FOR PROVAL BY
<u></u>	(VOTING GROUP)
SIGN	ED THIS 17 DAY OF OCT .2000.
SIGNATU	RE Glaser
	(BY THE CHAIRMAN OR VICE CHARIMAN OF THE BOARD, PRESIDENT, OR OTHER OFFICER)
	VIVIAN ABREU
	(TYPED OR PRINTED NAME)
	PRESIDENT

(TITLE)