# 10003477<sub>Page 1 of</sub>

# Florida Department of State

Division of Corporations Public Access System

# Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023

: (850)222-1092

Phone Fax Number

: (850)878-5368

# DISSOLUTION OR WITHDRAWAL

MAX ATLANTIC, INC.

Certificate of Status Certified Copy Page Count 03 Estimated Charge \$43.75

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Corporate Filing Menu

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12/31/2008

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FILED 2008 DEC 31 PM 2: 28

### ARTICLES OF DISSOLUTION

of dissolution:

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following

FIRST: The name of the corporation as currently filed with the Florida Department of State: MAX ATLANTIC, INC. The document number of the corporation (if known): P99000034774 SECOND: The date dissolution was authorized: 12/31/2008 THIRD: Effective date of dissolution if applicable: Date of Filing of these Articles
(no more than 90 days after dissolution file date) Adoption of Dissolution (CHECK ONE) FOURTH: Dissolution was approved by the shareholders. The number of votes east for dissolution was sufficient for approval. Dissolution was approved by 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 east for dissolution was sufficient for approval by (voting group) Signature: (By a director, 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) JACK AZOUT (Typed or printed name of person signing) PRESIDENT

Filing Fee: \$35

(Title of person signing)

## Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607,1407, F.S. This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Name of Corporation: MAX ATLANTIC, INC. Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Sufficient information reasonably to inform the Corporation of the identity of the claimant and the substance of the claim Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) P.O. BOX 630817 MIAMI FL 33163 A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00