P99000043202

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March 28, 2011

WAQAS MALIK RAOUF, INC. 901 E. 10TH AVE. HIALEAH, FL 33010

SUBJECT: RAOUF, INC. Ref. Number: P99000043202

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You have submitted two documents to dissolve the subject corporation. Please choose the correct type of dissolution according to Florida Statutes and resubmit only one document.

The document must state that a majority of the incorporators or directors authorized the dissolution.

IF CHOOSING 607.1401 ****** OR ******* IF CHOOSING 607.1403, THE DATE IN SECTION THIRD MUST INCLUDE THE MONTH, DAY AND YEAR. ALSO, UNDER SECTION FOURTH THE FIRST BOX SHOULD BE SELECTED UNLESS YOU DO HAVE VOTING GROUP. IF YOU DO HAVE VOTING GROUPS DO THE FOLLOWING:

If the dissolution was approved by the shareholders and if voting by voting groups was required, a statement that the number cast for dissolution was sufficient for approval must be separately provided for each voting group entitled to vote separately on the dissolution. The name(s) of each voting group(s) should be indicated.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245 6906.

Darlene Connell Regulatory Specialist !!

Letter Number: 311A00007482

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: RAOUF, INC.	
DOCUMENT NUMBER: RAOUF, INC.	
The enclosed Articles of Dissolution and fee are submitted for	or filing.
Please return all correspondence concerning this matter to the	e following:
WAQAS MALIK	
(Name of Contact Person)	
RAOUF, INC.	
(Firm/Company)	
901 E 10TH AVENUE	
(Address)	
HIALEAH FL 33010 US	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
HEATHER DEAN at (305	967-2814
(Name of Contact Person) (Area C	Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$\sqrt{\$35}\$ Filing Fee \$	
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 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 State:			
	Raouf, Inc.			
SECOND:	• • • • • • • • • • • • • • • • • • • •			
THIRD:	The date dissolution was authorized: 12/31/2009			
	Effective date of dissolution <u>if applicable:</u> 12/31/2009 (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 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 cast for dissolution was sufficient for approval by			
	PR TW			
	(voting group) 12 PH 12: 05			
	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)			
	Waqas Malik			
	(Typed or printed name of person signing)			
	President			
	(Title of person signing)			

Filing Fee: \$35

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: RAOUF, 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: INSOLVENT Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 2124 SW 185TH AVE MIRAMAR, FL 33029 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. WAQAS MALIK Printed Name of the Person Filing Signature of the Person Filing