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Requester's Name

Jason C. Magnuson
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Miami, Florida 33186

City/State/Zip

Phone #

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-09/15/00--01045--023
*****35.00 *****35.00

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
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- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

D:SS.

S. PAYNE SEP 20 2000

Examiner's Initials

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation is: MAGNU TECH CORPORATION

SECOND: The date dissolution was authorized: August 23rd, 2000

 x Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

(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 9th day of SEPTEMBER, 2000

{Corporation Name}

By ✓ *Harmon H. Hays*
(Chairman or Vice Chairman of the Board, President, or other officer)

(Typed or printed name)

(Title)