P99000084700

| (Requestor's Name) | | |
|-----------------------------------------|--------------|--|
| | | |
| (Address) | | |
| | | |
| (Address) | | |
| (Hadioss) | | |
| (0) (0) (7) (7) | | |
| (City/State/Zip/Pho | ne #) | |
| PICK-UP WAIT | MAIL | |
| | | |
| (Business Entity Na | ame) | |
| (Easilies Eliki) in | | |
| | | |
| (Document Numbe | r) | |
| Certified Copies Certificate | es of Status | |
| | | |
| | | |
| Special Instructions to Filing Officer: | | |
| | | |
| | | |
| | • | |
| | | |
| | | |
| | | |
| | | |





700129010657

05/20/08--01013--006 **43.75

 \mathcal{N}^{2}



T. Roberts MAY 2 8 2008

COVER LETTER

7 TO: Amendment Section

Tallahassee, FL 32314

| Division of Corporations | | |
|-------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|--|
| SUBJECT: Resolution of | Corporation | |
| \mathcal{O} | | |
| DOCUMENT NUMBER: P99000 | 00 84700 | |
| The enclosed Articles of Dissolution and fee are sub | omitted for filing. | |
| Please return all correspondence concerning this mat | ter to the following: | |
| TRENE MURRA (Name of Contact P | +Y | |
| (Name of Contact P | erson) | |
| Im Miani Tai | TIG. INC | |
| IM MIAMI INT (Firm/Compar | ny) | |
| 10/20 - 20 002 5 | | |
| 18605 5 W 293 7. (Address) | errall | |
| | | |
| Home stead, FL (City/State and Zip | 33030 | |
| (City/State and Zip | Code) | |
| For further information concerning this matter, pleas | e call: | |
| | | |
| TRENE MURRAY at (| 828) 681-1627 | |
| (Name of Contact Person) | (Area Code & Daytime Telephone Number) | |
| Enclosed is a check for the following amount: | | |
| Gertificate of Status Certificate | 5 Filing Fee & S52.50 Filing Fee, ed Copy onal copy is ed) Certificate of Status & Certified Copy (Additional copy is enclosed) | |
| MAILING ADDRESS: | STREET ADDRESS: | |
| Amendment Section Division of Corporations | Amendment Section Division of Corporations | |
| P.O. Box 6327 | Clifton Building | |
| Tallahassee, FL 32314 | 2661 Executive Center Circle | |

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

| | Directive date of dissolution if applicable. | |
|---------|--------------------------------------------------------------------|----------------------------------------------------|
| | - | (no more than 90 days after dissolution file date) |
| FOURTH: | Adoption of Dissolution (CHECK ONE) | |
| | Dissolution was approved by the sharehows sufficient for approval. | olders. The number of votes cast for dissolution |
| | ☐ Dissolution was approved by of the share | eholders through voting groups. |
| | . The following statement must be senarately: | provided for each voting group entited |

(voting group)

The number of votes cast for dissolution was sufficient for approval by

to vote separately on the plan to dissolve:

that fiduciary)

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

Typed or printed name of person signing)

(Title of person signing)

Filing Fee: \$35