P9900097/47

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
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THAPR -L PH 4: 10 SECRETARY OF STATE ALLAHASSEE, FLORIDGE



Division of Corporations
SUBJECT: DISSOLUTION OF CORPORATION
DOCUMENT NUMBER: P 990000 97147
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MASAMI TARUMI (Name of Contact Person)
(Name of Contact Person) Sushi Sau's Inc. (Firm/Company)
16628 90 th STREET NORTH
(Name of Contact Person) SUSHI SAM'S INC. (Firm/Company) 16628 90 LL STREET NORTH (Address) LOXAHATCHEE FL 33470 (City/State and Zip Code)
For further information concerning this matter, please call:
MASAMI TARUMI at (561) 429-8887 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigs\text{\$\substack}\$\$43.75 Filing Fee & \$\bigs\text{\$\substack}\$\$\$\$\$\$\$\$\$\$\$\$Certificate of Status & Certified Copy (Additional copy is enclosed) \$
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Taliahassee, FL 32314 MAILING ADDRESS: Amendment Section Division of Corporations Clifton Building Taliahassee, FL 32314 Z661 Executive Center Circle Taliahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to sof dissolution	section 607.1403, Florida Statutes, this Florida profit corporation submits the follo	wing article	* \$	
FIRST:	The name of the corporation as currently filed with the Florida Department of S Sushi Sam's INC.	state:		
SECOND:	The document number of the corporation (if known): P990009	7147	,	
THIRD:	The date dissolution was authorized: 1/3/11			
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file	e date)		
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes east for was sufficient for approval.	r dissolutio	n	
	Dissolution was approved by the shareholders through voting groups.			
	The following statement must be separately provided for each voting group enti- to vote separately on the plan to dissolve:	illed		
	The number of votes cast for dissolution was sufficient for approval by			
	(voting group)	SECR SECR	11 AP	
	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)	ETARY OF STATE MASSEE, FLORIDA	1 APR - 4 PM 4: 10	TICED
	MASAUI TARUMI (Typed or printed name of person signing) VICE PRESIDENT DIRECTOR			
	VICE PRESIDENT DIRECTOR			

Filing Fee: \$35