N1700002422

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Continue of Contin
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500426035355

03/20/24--01013--020 +*43.75

SECNEDARY OF STATE

TALLAPASSES THE

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: I.V.M. DIOS NO HACE ACEPO	CIÓN DE PERSONAS. CORP.
DOCUMENT NUMBER: N170000242	2
The enclosed Articles of Dissolution and	d fee are submitted for filing.
Please return all correspondence concern	me of Contact Person) (Firm/Company)
Gricelis Millan	
(Nar	me of Contact Person)
GGC	The contract of the contract o
	(Firm/Company)
4270 briarwood flat trace apt 34	. 121
	(Address)
Middleburg fl 32068	
(City	y/State and Zip Code)
For further information concerning this r	matter, please call:
Gricelis Millan	774 451-8391
(Name of Contact Person)	at ()(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following an	nount:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Certified Copy (Additional copy is enclosed) Status & Certified Copy (Additional copy is enclosed)

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION

Pursuant to section 617.1401, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State: LV.M. DIOS NO HACE ACEPCION DE PERSONAS.CORP.
SECOND:	The document number of the corporation (if known):
THIRD:	The document number of the corporation (if known): Marzo-6-2017 The file date of the articles of incorporation: Marzo-6-2017 The corporation has not commenced to conduct its affairs.
FOURTH	The corporation has not commenced to conduct its affairs.
FIFTH:	No debts of the corporation remains unpaid.
SIXTH:	Adoption of Dissolution (CHECK ONE) (Note: Cannot be authorized by an incorporator if the corporation has directors)
	☐ The dissolution was authorized by a majority of the directors: OR
	■ The dissolution was authorized by an incorporator.
•	☐ The dissolution was authorized by a majority of the incorporators.
_	(By the chairman or vice chairman of the board, president or other officer- if directors have not been an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	Gricelis Millan
	(Typed or printed name of person signing)
	Ministro ordenado
	(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. 617.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

I.V.M. DIOS NO HACE ACEPCION DE PERSONAS. CORP
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:
made this claim on 2-24-2024 to be able to remove the name but I sent the form
Wrong and now I'm sending this so you can help me since the store is closed
Since 2018, thank you very much for your help and customer service.
Thanks you!
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Middleburg fl 32068
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. Gricelis Millan
Printed Name of the Person Filing Signature of the Person Filing