## 200000053005

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	» #)
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

TO: Amendment Section

Division of Corporations	
SUBJECT: DISSOLUTION OF PROFIT COR	PORATION
DOCUMENT NUMBER: P00000053005	
The enclosed Articles of Dissolution and fee are submitted for	or filing.
Please return all correspondence concerning this matter to the	e following:
JOSEFINA AVILES	
(Name of Contact Person)	
SIGLO XXI, INC	
(Firm/Company)	
27800 SW 127TH AVENUE	
(Address)	•
MIAMI, FL 33033	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
	288-7261
(Name of Contact Person) (Area (	Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
□\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee Certificate of Status  Certificate of Status  Certified Copy  (Additional copy enclosed)	
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	F/LF) section 607.1403, Florida Statutes, this Florida profit corporation submits the following article
of dissolutio	
	TALLAHASEY OF
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	SIGLO XXI, INC
SECOND:	The document number of the corporation (if known): P0000053005
THIRD:	The date dissolution was authorized: 3/9/2006
	Effective date of dissolution if applicable: 3/9/2006
	(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 of 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
	JOSEFINA AVILES
	(voting group)
\$	Signature: JOSEFINA-AVILES  (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)
	JOSEFINA AVILES
	(Typed or printed name of person signing)
	PRESIDENT
1	(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: SIGLO XXI, 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: PERSON OR COMPANY MAKING CLAIM, SUBJECT OF CLAIM, AND AMOUNT OF CLAIM Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 1661 NE 8TH ST HOMESTEAD, FL 33030 ATTN: ROSALINA MARTINEZ-VILLA 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. Signature of the Person Filing **JOSEFINA AVILES** Printed Name of the Person Filing