P080000 83611

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
\$ 55.00 Paid

Office Use Only

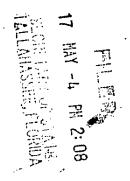


100297552521/

04/06/17--01018--021 **55.00

S. TALLENT MAY 0 5 2017

1/D





FLORIDA DEPARTMENT OF STATE Division of Corporations

April 10, 2017

FERNANDO HERRERA KID'S CENTER INC. 530 CATALONIA AVENUE CORAL GABLES, FL 33134

SUBJECT: KID'S CENTER INC. Ref. Number: P08000083611

We have received your document and check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

The form you submitted is for a LIMITED LIABILITY COMPANY, but your entity is a FLORIDA PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 217A00006880

COVER LETTER

Division of Corporations
SUBJECT: KID'S CENTER INC.
DOCUMENT NUMBER: P08000083611
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ERNANDO HERRERA (Name of Contact Person)
KID'S CENTER INC.
(Firm/Company)
530 OATALONIA AVENUE
(Address) CORAL GABLES, FLORIDA 33134. (City/State and Zip Code)
For further information concerning this matter, please call:
FERNAND HERRERA at (786) 256-77-79 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
S35 Filing Fee Scertificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee Scertified Copy (Additional copy is enclosed) S52.50 Filing Fee, Certificate of Status Scertified Copy (Additional copy is enclosed) Certificate of Status Scertified Copy (Additional copy is enclosed) A ready submittee
MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	VID'S CENTER INC.
SECOND:	The document number of the corporation (if known): PO 8 0 0 0 8 3 6 1
THIRD:	The date dissolution was authorized: $03/27/2017$
	Effective date of dissolution if applicable: 03/30/2017 (no more than 90 days after dissolution file date)
	Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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 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
	(voting group) 2: 07 07 07 07 07 07 07 07 07 07 07 07 07
	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)
	FERNANDO HERRERA
	(Typed or printed name of person signing)
	TRESIDENT
	(Title of person signing)