P17000057622

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COVER LETTER

тф:					
	Division of Corporations				
SUBJ	CCT: CORporate Dissolution				
DOC	MENT NUMBER: P1700005762				
The e	closed Articles of Dissolution and fee are submitted for filing.				
Please	return all correspondence concerning this matter to the following:				
	Placio / Fernande Z (Name of Contact Person)				
	(Name of Contact Person)				
	(Firm Company)				
	740 82 nd st Apt 2 (Address)				
	(Address)				
-	fliami Beach, FL, 33141 (City/State and Zip Code)				
For fu	ther information concerning this matter, please call:				
	lario Fernandez at (786-282-2660				
	(Name of Contact Person) (Area Code) (Daytime Telephone Number))			
Enclo	ed is a check for the following amount:				
32/ \$35	Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certificate of 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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

ARTICLES OF DISSOLUTION

Pursuarlt to section 607.1403. Florida Statutes, this Florida profit corporation submits the following ar of dissolution: The name of the corporation as currently filed with the Florida Department of State: FIRST: Editorial Das Orillas Inc SECOND: The document number of the corporation (if known):_ The date dissolution was authorized: 04/20/20/8 THIRD Effective date of dissolution if applicable: (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 east 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) 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) (Typed or printed name of person signing) 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.

Thio "Ma	stice of Components	Dissolution" is optional and is not required when filing a voluntary dissolution.
Name of	Corporation: $\underline{\mathcal{E}}_{\ell}$	ditorial Des Orilles Inc.
	lissolution will be in the <i>Articles of</i>	the date the dissolution is filed with the Department of State or as Dissolution.
Descript	on of information	that must be included in a claim:
1		
_,		i
Mailing a	ddress where clai	ims can be sent: (Claims cannot be sent to the Division of Corporations)
	440 82	nd St Apt 2 pliani Beach, FC, 33 141
		1
A claim a	gainst the above t	named corporation will be barred unless a proceeding to enforce the claim is commenced
	years after the filin	
10.	21 Car	la dia
_pra	Printed Na	ine of the Person Filing Signature of the Person Filing
		1
	[

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00