

262977

Robin Lukacs

(Requestor's Name)

1825 Coral Way

(Address)

mail stop: APICO Claims

(Address)

miami, fl 33145

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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FILED
11 MAY -4 PM 2:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION

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

FILED
11 MAY - 4 2:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation as currently filed with the Florida Department of State:
APPRAISAL AND INVESTMENT CORPORATION OF FLORIDA

SECOND: The document number of the corporation (if known): 262977

THIRD: The date dissolution was authorized: December 30, 2010

Effective date of dissolution if applicable: December 31, 2010
(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 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)

Robin A. Lukacs

(Typed or printed name of person signing)

President

(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: APPRAISAL AND INVESTMENT CORPORATION OF FLORIDA

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:

Name of claimant

Amount claimed

Description of the services or goods for which amount is claimed

Date of delivery of the services or goods for which amount is claimed

Name of person which authorized delivery of services or goods for which amount is claimed

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

1825 Coral Way

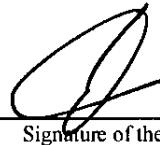
Mail Stop: APICO Claims

Miami, Florida 33145

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.

Robin A. Lukacs

Printed Name of the Person Filing



Signature of the Person Filing

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