

333091

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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12-31-05

12/27/05--01039--010 **52.50

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

dis.

C. Coulllette JAN 06 2006

CHERN AND SEVIN
ATTORNEYS AT LAW
1313 PONCE DE LEON BOULEVARD, SUITE 301
CORAL GABLES, FLORIDA 33134

NORMAN M. SEVIN, P.A.

MARSHALL M. CHERN
(RETIRED)

TELEPHONE (305) 443-3343
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December 22, 2005

CERTIFIED MAIL
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: ELVIRA INCORPORATED

Gentlemen:

Enclosed please find the following:

1. Articles of Dissolution for Elvira Incorporated.
2. Our firm's operating account check payable to the Department of State, in the amount of \$52.50, representing the filing fee, one certified copy of same, and a Certificate of Status.

Please return to us a certified copy of the Articles of Dissolution, together with a Certificate of Status, promptly after it has been filed, in the enclosed self-addressed stamped envelope.

Thank you for your prompt attention to this matter.

Sincerely,

CHERN AND SEVIN

BY: Norman M. Sevin
NORMAN M. SEVIN

NMS/jbc
encl.

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
ELVIRA INCORPORATED

SECOND: The document number of the corporation (if known): 333091

THIRD: The date dissolution was authorized: November 29, 2005
Dissolution to be Effective 12/31/05.
Effective date of dissolution if applicable: December 31, 2005
(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

(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)

JAY M. COHEN

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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