## 571905

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
<b>(</b> Bu	siness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
,		

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04/29/16--01014--010 \*\*35.00



5/500



April 18, 2016

**TAIMUR KHAN** 7400 SW 50 TERRACE, STE 105 MIAMI, FL 33155

SUBJECT: SIDDIQ KHAN & ASSOCIATES, INC. Ref. Number: 571905

The fee to file your document is \$35.00.

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

Letter Number: 816A00007950

Carol Mustain Regulatory Specialist II

www.sunbiz.org

## 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:
	Siddig Khan + Associates Inc
SECOND:	The document number of the corporation (if known): 571905
THIRD:	The date dissolution was authorized: 12/31/15
	Effective date of dissolution <u>if applicable:</u> (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. ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
	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
	Tamur Khan (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)
	Taimut Khan (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.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: Siddig Khan + Associates In C
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 entity seeking claim.
Fadress and contact information
Purpose of claim
Reason of claim
Date of crain
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Sidaig Khan + Associates Inc
YO KLA INC
7400 SW 50 Terrace, Suite 105
Miami, FL 33155
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.
Taimur Khan

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

Signature of the Person Filing

Printed Name of the Person Filing