723621

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(Ad	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
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COVER LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: DISCOLLE NON- PROFIT
DOCUMENT NUMBER: 723621
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MARTA ESTEVEZ
(Name of Contact Person) SOCIEDAD INTERNACIONAL DE RADIO AFICIONAPOR, INC.
(Time Company)
P.O. BOX 22442 (Address)
HIALEAH, FL 33002 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
MARTA ESTEUE Z at (305) 822-1688 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\square\$
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

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ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State: SOCIEDAD INTERNACIONAL DE RADIO AFICIONADOS! INC. The document number of the corporation (if known):__ SECOND: THIRD: Adoption of Dissolution (COMPLETE SECTION I OR II) SECTION I If the corporation has members entitled to vote: (CHECK/COMPLETE ONE) The date of the meeting of members at which the resolution to dissolve was adopted . The number of votes cast by the members was sufficient for approval. ☐ The resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes. SECTION II If the corporation has no members or members entitled to vote on the dissolution: The corporation has no members or members entitled to vote on the dissolution. The date of adoption of the resolution by the board of directors was 11/17/12The number of directors in office was _____ and the vote for resolution was for and _____ against. (Must be a majority vote)

OURTH:	Effective date of dissolution if applicable:
	(no more than 90 days after dissolution file date)
	Signature (By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)
	MARTA ESTEJEZ (Typed or printed name of the person signing)
	TREASURER, DIRECTOR
	(Title of person signing)

FILING FEE: \$35