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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: DISSOLUTION OF RAWL CORPOR	ATION
DOCUMENT NUMBER: J87302	
The enclosed Articles of Dissolution and fee are submitted for	filing.
Please return all correspondence concerning this matter to the fo	ollowing:
EVELYN RAWLEY	
(Name of Contact Person)	
RAWL CORPORATION	
(Firm/Company)	
11621 SW 112 STREET	
(Address)	
MIAMI FLORIDA 33176	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
BEN RAWLEY at (305) (Name of Contact Person) (Area Co.	279-6992 de & Daytime Telephone Number)
Enclosed is a check for the following amount:	
✓ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee Certificate of Status Certified Copy (Additional copy in enclosed)	e & []\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Fallahassee, FL 32301

ARTICLES OF DISSOLUTION Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation subm articles of dissolution: The name of the corporation as currently filed with the Florida Department of State: FIRST: RAWL CORPORATION, INC. The document number of the corporation (if known): <u>J87302</u> SECOND: The file date the articles of incorporation: 08-13-1987 THIRD: (CHECK AT LEAST ONE BOX) FOURTH: None of the corporation's shares have been issued. The corporation has not commenced business. FIFTH: No debt of the corporation remains unpaid. The net assets of the corporation remaining after winding up have been distributed SIXTH: to the shareholders, if shares were issued. SEVENTH: Adoption of Dissolution (CHECK ONE) A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution. Signature: (By a director, presiden for other officer - if director s 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.) **EVELYN RAWLEY** (Typed or printed name of person signing) DIRECTOR

Filing Fee: \$35

(Title of Person Signing)