L52957

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12/29/10--01022--005 **175.00



Effective: 12-31-10

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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations SUBJECT: Horchers, Inc. DOCUMENT NUMBER: L52957 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Michael Ortiz, Esq. (Name of Contact Person) Michael Ortiz, P.A. (Firm/Company) 1430 S. Dixie Highway, Suite #321 (Address) Coral Gables, FL 33146 (City/State and Zip Code) For further information concerning this matter, please call: at (305 Michael Ortiz (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: □\$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **MAILING ADDRESS: STREET ADDRESS:** Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

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	f State	:			
	Horchers, Inc.					
SECOND:	: The document number of the corporation (if known): L52957					
THIRD:	Docombor 22, 2010					
	Effective date of dissolution <u>if applicable</u> : 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 if was sufficient for approval.	or dis	solutior			
	Dissolution was approved by the shareholders through voting groups.					
	The following statement must be separately provided for each voting group en to vote separately on the plan to dissolve:	ıtitled				
•	The number of votes cast for dissolution was sufficient for approval by					
		10				
	(voting group)	DEC 29				
	Simon	PM 12: 0&	Ti Co			
	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)	; e r				
	Michael Ortiz					
	(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 Corpora	_{ation:} Horchers,	Inc.	
	on will be the date the Articles of Dissolution	e dissolution is filed with the Department of State or as n .	
Description of in	formation that must l	be included in a claim:	
1. Name of	Creditor	2. Amount of Claim	
3. Does Cla	aim bear intere	est	
4. Date of 0	Claim		
5. Nature o	of Claim (e.g. fo	or goods sold, services rendered, etc.)	
6. Any other	er information (Creditor deems pertinent	
-		sent: (Claims cannot be sent to the Division of Corporations)	
-	c/o Michael Or	tiz, P.A.	
	1430 S. Dixie	Highway	
_	Suite #321		
	Coral Gables,	FL 33146	

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.

Michael Ortiz, President

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