159274

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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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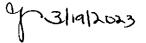
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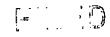


COVER LETTER

TO: Amendment Section

Division of Corporations SUBJECT: TERALBA, INC. DOCUMENT NUMBER: 1.59274 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Brian S. Dervishi, Esq. (Name of Contact Person) Weissman & Dervishi, P.A. (Firm/Company) One Southeast Third Avenue, Suite 1700 (Address) Miami, FL 33131 (City/State and Zip Code) For further information concerning this matter, please call: Emma Lastra (Area Code) (Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: ■ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certificate of Status & Certified Copy Certified Copy (Additional copy is enclosed) (Additional copy is enclosed) Mailing Address: Street Address: Amendment Section Amendment Section **Division of Corporations** Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303



ARTICLES OF DISSOLUTION

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Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution: The name of the corporation as currently filed with the Florida Department of State: FIRST: TERALBA, INC. The document number of the corporation (if known): SECOND: The date dissolution was authorized: _____ THIRD: Effective date of dissolution if applicable: (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. Dissolution was approved by the shareholders, in the manner required by this chapter and FOURTH: the articles of incorporation. 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) Robert Andai (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 Corporation: TERALBA, INC.	
The above named corporation is the subject of dissolution and the eff 12/31/2022	ective date of a dissolution is:
(date filed with the Dept. if date specified in th	e Articles of Dissolution)
Description of information that must be included in a claim:	
1. NAME, ADDRESS, TELEPHONE NUMBER, EMAIL ADDRESS OF C	CLAIMANT
2. AMOUNT OF CLAIM	
3. BASIS FOR CLAIM AND DATE/DATES ON WHICH CLAIM IS BAS	SED
4. SUPPORTING DOCUMENTS EVIDENCING THE AMOUNT OF THE CLAIM AND THE OBLIGATION	
FOR PAYMEN'T	
Mailing address where written claims can be sent: (Claims cannot be c/o Brian S. Dervishi, Esq.	sent to the Division of Corporations)
Weissman & Dervishi, P.A.	
One Southeast Third Avenue, Suite 1700	
Miami, FL 33131	
A claim against the above named corporation will be barred unless a within 4 years after the filing of this notice. Brian S. Dervishi	proceeding to enforce the claim is commenced
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