(Requestor's Name) (Address) (Address)	00015496
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	05/01/0901052-
(Document Number) Certified Copies Certificates of Status	TALLAH
Special Instructions to Filing Officer:	TALLAHASSEE, FLORIDA

Office Use Only



1360

--011 **43.75

SECRETARY OF STATE

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: FESTIVAL MEXICO LINDO INC	
•	
DOCUMENT NUMBER: N0600000599	
The enclosed Articles of Dissolution and fee are submitted	ed for filing.
Please return all correspondence concerning this matter to	the following:
EMILIO CIODARO	
(Name of Contact Person	n)
FESTIVAL MEXICO LINDO	INC
(Firm/Company)	
850 MCINNIS COURT	
(Address)	
KISSIMMEE FL 34744 (City/State and Zip Code)	
For further information concerning this matter, please call	
EMILIO CIODARO at (40' (Name of Contact Person) (Art	7 346-2604 ea Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	,
<u>_</u>	P. 0 □652 50 P
S35 Filing Fee ✓ \$43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certified Co (Additional enclosed)	* •
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

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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:
	FESTIVAL MEXICO LINDO INC
SECOND:	The document number of the corporation (if known): N0600000599
THIRD:	The file date of the articles of incorporation: 01/20/2006
FOURTH:	(CHECK AT LEAST ONE BOX)
	☐ None of the corporation's shares have been issued. ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
	The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	No debt of the corporation remains unpaid. The net assets of the corporation remaining after winding up have been distributed 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.
Sign	ature: (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.)
	EMILIO CIODARO
	(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: FESTIVAL MEXICO LINDO INC
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:
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
850 MCNNIS COURT
KISSMMEE, FL 34744
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.
EMILIO CIODADO
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