N0800000 1895

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		





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(RM 1-5-15

COVER LETTER

TO: Amendment Section Division of Corporations	iami, Inc.
SUBJECT: 4TH Street Condominium Association of M	iami, Inc.
DOCUMENT NUMBER: N0800001895	
The enclosed Articles of Dissolution and fee are submitted for fill	ing.
Please return all correspondence concerning this matter to the following	owing:
Michael Ortiz, Esq.	
(Name of Contact Person)	
Michael Ortiz, P.A.	
(Firm/Company)	
1430 South Dixie Hwy. Suite 321	·
(Address)	
Coral Gables, FL 33146	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Michael Ortiz at (305)	665-5270
(Name of Contact Person) at (Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount:	
■ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fe Certificate of Status Certified Copy (Additional copy enclosed)	Certificate of Status &

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 617.1401, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

4TH Street Condominium Association of Miami, Inc.	
The document number of the corporation (if known): N08000001895	
The file date of the articles of incorporation: 02/25/2008	
The corporation has not commenced to conduct its affairs.	
No debts of the corporation remains unpaid.	**
Adoption of Dissolution (CHECK ONE) (Note: Cannot be authorized by an incorporator if the corporation has directors)	CHEST CHEST
The dissolution was authorized by a majority of the directors: OR	C
☐ The dissolution was authorized by an incorporator.	
☐ The dissolution was authorized by a majority of the incorporators.	
(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)	
	The document number of the corporation (if known): N08000001895 The file date of the articles of incorporation: 02/25/2008 The corporation has not commenced to conduct its affairs. No debts of the corporation remains unpaid. Adoption of Dissolution (CHECK ONE) (Note: Cannot be authorized by an incorporator if the corporation has directors) OR The dissolution was authorized by a majority of the directors: OR The dissolution was authorized by an incorporator. The dissolution was authorized by a majority of the incorporators.

Filing Fee: \$35

(Typed or printed name of person signing)

Director and President
(Title of person signing)

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. 617.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: 4TH Stree	t Condominium Association of Miami, Inc.
Date of dissolution will be the date the Articles of Dissolution.	e dissolution is filed with the Department of State or as specified in the
Description of information that must b	be included in a claim:
1. Name of creditor	6. Any other information creditor deems pertinent
2. Amount of claim	
3. Date of claim	
4. Nature of claim (e.g. for	goods sold, services rendered, etc.)
5. Does claim bear interes	st
Mailing address where claims can be Michael Ort iz	sent: (Claims cannot be sent to the Division of Corporations) Z, P.A.
1430 South	Dixie Hwy. Suite 321
Coral Gables, FL 33146	
	,
A claim against the above named corp within 4 years after the filing of this n	poration will be barred unless a proceeding to enforce the claim is commence

Michael Ortiz

Printed Name of the Person Filing