

Florida Department of State
Division of Corporations
Public Access System
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H09000182262 3)))



H090001822623ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : LAZARIUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 AUG 14 PM 2:14

FILED

DISSOLUTION OR WITHDRAWAL

LOSS MITIGATION SERVICE PROVIDERS & CO. INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

H09000182262

ARTICLES OF DISSOLUTION

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

- FIRST: The name of the corporation as currently filed with the Florida Department of State:
LOSS MITIGATION SERVICE PROVIDERS & CO. INC.
- SECOND: The document number of the corporation (if known): N08000009227
- THIRD: The file date of the articles of incorporation: 10/03/09
- FOURTH: The corporation has not commenced to conduct its affairs.
- FIFTH: No debts of the corporation remains unpaid.
- SIXTH: Adoption of Dissolution (CHECK ONE)
(Note: Cannot be authorized by an incorporator if the corporation has directors)
- ☐ 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.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 AUG 14 PM 2:14

FILED

Signature: _____

(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)

VICTOR RODRIGUEZ
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)

Filing Fee: \$35

H09000182262