





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 28, 2014

ROBERT RODRIGUEZ  
12 ELAINE CT  
WOODCLIFF LAKE, NJ 07677

SUBJECT: SU SALUD YA INC  
Ref. Number: N09000008655

We have received your document for SU SALUD YA INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have submitted the wrong form.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White  
Regulatory Specialist II

Letter Number: 114A00001889

RECEIVED  
14 FEB 10 AM 7:48  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dissolution Su Salud Ya Inc.

**DOCUMENT NUMBER:** N09000008655

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert Rodriguez

(Name of Contact Person)

(Firm/Company)

12 Elaine Ct.

(Address)

Woodcliff Lake, NJ 07677

(City/State and Zip Code)

For further information concerning this matter, please call:

Robert Rodriguez at (917) 6603779

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35 Filing Fee     \$43.75 Filing Fee & Certificate of Status     \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)     \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is 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 617.1403, 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:

Su Salud Ya Inc.

SECOND: The document number of the corporation (if known): N09000008655

THIRD: Adoption of Dissolution  
**(COMPLETE SECTION I OR II)**

SECTION I

If the corporation has members entitled to vote:

(CHECK/COMPLETE ONE)

The date of meeting of members at which the resolution to dissolve was adopted  
12/31/2013. The number of votes cast by the members was sufficient for approval.

The resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes.

SECTION II

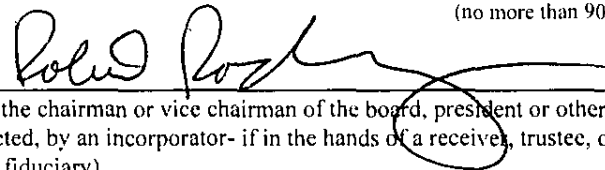
If the corporation has no members or members entitled to vote on the dissolution:

The corporation has no members or members entitled to vote on the dissolution.

The date of adoption of the resolution by the board of directors was \_\_\_\_\_.

The number of directors in office was \_\_\_\_\_ and the vote for resolution was \_\_\_\_\_ for and \_\_\_\_\_ against. (Must be a majority vote)

FOURTH Effective date of dissolution, if applicable: 12/31/2013  
(no more than 90 days after dissolution file date)

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)

Robert Rodriguez  
(Typed or printed name of person signing)

Director  
(Title of person signing)

FILED  
14  
FEB 10 PM 4:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: Su Salud Ya 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:

Usual and Customary  
Along w/ Signed Orders or Contracts

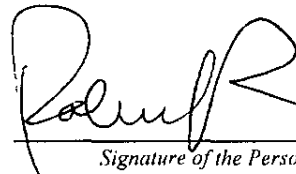
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Robert Rodriguez  
~~12 Elaine Ct~~  
15757 Pines Blvd. #287  
Pembroke Pines, FL 33027

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.

Robert Rodriguez

Printed Name of the Person Filing



Signature of the Person Filing