

P0000020140

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

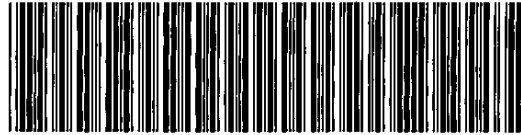
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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void w/ notice

08/06/07--01045--002 **35.00

FILED
2007 AUG -6 PM12:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: JETPOWER SERVICES, INC.

DOCUMENT NUMBER: P00000020140

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

Please return all correspondence concerning this matter to the following:

Eric A. Gonzalez, Esquire
ROCA GONZALEZ, P.A.
2601 South Bayshore Drive, Suite 600
Miami, Florida 33133

For further information concerning this matter, please call:

Eric A. Gonzalez at (305) 859-6050

Enclosed is a check for the \$35.00 Filing Fee.

ARTICLES OF DISSOLUTION

Pursuant to section 607.140~~2~~, Florida Statutes, this profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

JETPOWER SERVICES, INC.

Second: The document number of the corporation:

P00000020140

THIRD: The date dissolution was authorized:

July 31, 2007

FOURTH: Dissolution was approved by the Shareholders. The number of votes cast for dissolution was sufficient for approval.


Viveca Salvatierra, President

FILED
0001 AUG - 9 PM 12:09
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. 607.1407, F.S.

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

Name of Corporation: JETPOWER SERVICES, INC.

Date of dissolution will be the date the dissolution is filed with the Department of State.

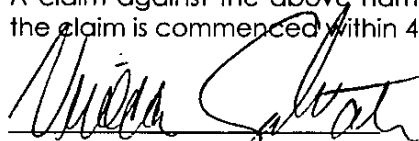
Description of information that must be included in a claim:

The claim must include a brief description of the claim, the date in which the claim arose and the amount of the claim.

Claims may be sent to:

8391 Northwest 64 Street
Miami, Florida 33166

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.



Viveca Salvatierra, President