## P00000028608

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SECRETARY OF STATE TALLAHASSEE, FLORIDATE TO APR 21 AM 11: 50

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Articles of Dissolution
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Marisela Gamez (Name of Contact Person)
FL Home Loans, Inc.
814 Ponce De Leon Blud. #503 (Address)
Coral Gables, FL 33134 (City/State and Zip Code)
For further information concerning this matter, please call:
Marisela Gamez at (305) 461 0755  (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S35 Filing Fee S43.75 Filing Fee & V\$43.75 Filing Fee & S52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed)  Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, 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:			
	FL Home Loans, Inc.			
SECOND:	The document number of the corporation (if known): POOOOO28608			
THIRD:	The date dissolution was authorized: 01 2010			
	Effective date of dissolution <u>if applicable:</u> (no more than 90 days after dissolution file)	le date)		
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes cast fo was sufficient for approval.	r dissolution		
	Dissolution was approved by the shareholders through voting groups.			
	The following statement must be separately provided for each voting group ent to vote separately on the plan to dissolve:	itled		
	The number of votes cast for dissolution was sufficient for approval by			
	(voting group)			
•	Signature:  (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)  (Typed or printed name of person signing)	SECRETARY OF STATE TALLAHASSEE FLORIDA 10 APR 21 AM 11: 50		
	(Title of person signing)			

Filing Fee: \$35