	Requestor's Name)
,	requestors rearrie)
(Address)
(Address)
	City/State/Zip/Phone #)
☐ PICK-LIP	☐ WAIT ☐ MAIL
	Business Entity Name)
·	,
	Document Number)
Certified Conies	Certificates of Status
Certified Copies	
Special Instructions	to Filing Officer
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Office Use Only



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OCT 11 2013

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: FIRST NATIONAL INVES	TMENTS OF THE CARIBBEA	AN, INC.
DOCUMENT NUMBER: P0000	0055114	
The enclosed Articles of Dissolution and	fee are submitted for filing.	
Please return all correspondence concerni	ng this matter to the following:	
STEPHEN A VINCEN	Т	
`	f Contact Person)	
A&S SIBB II, LLC		<u> </u>
	rm/Company)	
3101 N FEDERAL HW	Y SUITE 701	
FORT LAUDERDALE,	Address) FL 33306	
(City/S	tate and Zip Code)	
For further information concerning this m	natter, please call:	
MYRNA CIAN	at (954) 563-	4066
(Name of Contact Person)		ime Telephone Number)
Enclosed is a check for the following amo	ount:	
■ \$35 Filing Fee \$\square\$ \$43.75 Filing Fee & Certificate of Status	Certified Copy Ce (Additional copy is Ce enclosed) (Additional copy is	2.50 Filing Fee, rtificate of Status & rtified Copy dditional copy is oclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Clifton Bui	t Section Corporations

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: FIRST NATIONAL INVESTMENTS OF THE CARIBBEAN, INC.
SECOND:	The document number of the corporation (if known): P0000055114
THIRD:	The date dissolution was authorized: 09/01/2013
	Effective date of dissolution if applicable: 09/01/2013 (no more than 90 days after dissolution file date)
FOURTH:	Adoption of Dissolution (CHECK ONE)
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
	☐ Dissolution was approved by the shareholders through voting groups.
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:
	The number of votes cast for dissolution was sufficient for approval by
	N/A
	(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)
	STEPHEN A VINCENT
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of nerson signing)

Filing Fee: \$35

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.

	tion:
	on will be the date the dissolution is filed with the Department of State or as articles of Dissolution.
Description of in	formation that must be included in a claim:
BUSINE	SS IS CLOSED.
<u>-</u>	where claims can be sent: (Claims cannot be sent to the Division of Corporations)
	3101 N FEDERAL HWY
•	3101 N FEDERAL HWY SUITE 701
	受め 6時
	SUITE 701 FORT LAUDERDALE, FL 33306
A claim against	SUITE 701

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00