## Para 773/5

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	WAIT .	MAIL		
(Bu	siness Entity Name)			
(Document Number)				
Certified Copies	_ Certificates of	Status		
Special Instructions to Filing Officer:				
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Office Use Only



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SECRETARY OF STATE
SECRETARY OF STATE

## **COVER LETTER**

**TO:** Amendment Section

Division of Corporations				
SUBJECT: Filing for Dissolution				
DOCUMENT NUMBER: 604.1401	· · · · · · · · · · · · · · · · · · ·			
The enclosed Articles of Dissolution and fee are sub-	mitted for filing.			
Please return all correspondence concerning this matt	er to the following:			
Maria Cordoba				
(Name of Contact Pe	erson)			
Cordoba Trucking, Inc.				
(Firm/Company)				
9980 SW 38 Terrace				
(Address)				
Miami, Fl 33165				
(City/State and Zip	Code)			
For further information concerning this matter, please	e call:			
	786 ) 266-5718			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:				
	ed Copy Certificate of Status & Certified Copy			
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 607.1401, 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:			
	Cordoba Trucking, Inc.			
SECOND:	The document number of the corporation (if known): P00000077315			
THIRD:	The file date of the articles of incorporation: $08/16/00$			
FOURTH:	(CHECK AT LEAST ONE BOX)			
	None of the corporation's shares have been issued.			
	✓ The corporation has not commenced business.			
FIFTH:	No debt of the corporation remains unpaid.			
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.			
SEVENTH	Adoption of Dissolution (CHECK ONE)			
	A majority of the incorporators authorized the dissolution.			
	A majority of the directors authorized the dissolution.			
Sign	ature:  (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.)			
	Maria Cordoba			
	(Typed or printed name of person signing)			
	President			
	(Title of Person 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.

Name of Corporation:	Cordoba Trucking, Inc	•	
Date of dissolution will specified in the <i>Articles</i>	be the date the dissolution is filed with of Dissolution.	h the Department of State or as	
Description of informat	ion that must be included in a claim:		
N/A			
			***
***************************************		**************************************	
Mailing address where	claims can be sent: (Claims cannot be	sent to the Division of Corporations)	
Mari	a Cordoba		
9980	0 SW 38 Terrace		
Miai	mi, Fl 33165		
	and the second s		
A claim against the aborwithin 4 years after the		nless a proceeding to enforce the claim	is commenced
Maria Cordob	•a	Marian	/
Printed	Name of the Person Filing	Signature of the Person Filing	p