lorida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H180001113983)))



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To:

Division of Corporations

: (850)617-6380

From:

: MICHAEL J. FREEMAN, P.A. Account Name

Account Number: 072720000142 Phone

: (305)442-1567

Fax Number

: (305)442-1227

APR 1 0 2018

DISSOLUTION OR WITHDRAWAL MIAMI CARAVAN, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35,00

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ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

riksi;	MIAMI CARAVAN, INC.	
SECOND:	The document number of the corporation (if known):	
THIRD: The file date of the articles of incorporation: 11/28/2000		
FOURTH:	(CHECK AT LEAST ONE BOX)	
	None of the corporation's shares have been issued.	
	The corporation has not commenced business.	
FJFTH:	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.	.18 APP
SEVENTH	: Adoption of Dissolution (CHECK ONE)	- <u>5</u>
	A majority of the incorporators authorized the discolution	<u>></u>
		7: 5#
Sigr 	nature: Philipsiana (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.)	
	MICHAEL J. FREEMAN	
	(Typed or printed name of person signing)	
	Director Change	
	(Title of Person Signing)	

- Filing Fee: \$35

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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. MIAMI CARAVAN, INC. Name of Corporation: 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: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) P.O. BOX 140668 CORAL GABLES, FL 33114 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. MICHAEL J. FREEMAN, DIRECTOR Printed Name of the Person Filing

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

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