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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Dissolution of Corpora	ition
DOCUMENT NUMBER: P0000011	3427
DOCUMENT NUMBER: 1 0000011	UTZ1
The enclosed Articles of Dissolution and f	ee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Alma Luna	
(Name of	Contact Person)
Amigos Taxi Inc.	
(Firr	n/Company)
P O Box 2303	
(A	ddress)
Labelle Fl. 33975	
(City/Sta	te and Zip Code)
For further information concerning this ma	tter, please call:
Alma Luna	at (863) 673-3637
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amou	int:
	S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy (Additional copy is enclosed) S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
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 St	tate:	
	Amigos Taxi Inc.		
SECOND:	The document number of the corporation (if known): P00000113427		
THIRD:	The file date of the articles of incorporation: $12 12 2000$		
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 distribute to the shareholders, if shares were issued.		SIAID
SEVENTH:	Adoption of Dissolution (CHECK ONE)	9 MAF	SECRET DIVISION O
	A majority of the incorporators authorized the dissolution.	26	ARY O
	A majority of the directors authorized the dissolution.	09 MAR 26 PM 2: 09	ARY OF STATIONS
Sign	nature: Alma Luna		
•	(By a director, president or other officer - if directors or officers have not been selected, by an incorpo in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	rator - if	
	Alma Luna		
	(Typed or printed name of person signing)		
	Secretary		
, ~	(Title of Person Signing)	•	

Filing Fee: \$35