Division of Corporations Public Access System

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(((H060002706523)))



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To:

Division of Corporations

Fax Number : (850)205-0380

From:

Account Name : BOSCH ACCOUNTING & TAX SERVICES CORPORATION

Account Number : I19990000045 Phone : (954)730-0640

Fax Number : (954)730-0292

DISSOLUTION OR WITHDRAWAL

AVICLA CORPORATION

Certificate of Status	
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Page Count	. 0:
Estimated Charge	\$43
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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: AVICLA CORPORATION		
DOCUMENT NUMBER: P01000057525		
The enclosed Articles of Dissolution and fee are submitted for	or filing.	
Please return all correspondence concerning this matter to the	e following:	
JAIRO BOSCH		
(Name of Contact Person)	-	
BOSCH ACCOUNTING AND TAX SERV	ICES CORPORATION	
(Firm/Company)		
5440 NORTH STATE ROAD 7, SUITE 5		
(Address)		
FORT LAUDERDALE, FL 33319	***	
(City/State and Zip Code)		
For further information concerning this matter, please call:		
JAIRO BOSCH at (954	730-0640	
(Name of Contact Person) (Area C	Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	•	
S35 Filing Fee 43.75 Filing Fee & S43.75 Filing Fee Certificate of Status (Additional copy enclosed)	Certificate of Status &	
MAILING ADDRESS: Amendment Section	STREET ADDRESS:	
Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

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ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIR\$T:	The name of the corporation as currently filed with the Florida Department of	of State:		
,	AVICLA CORPORATION			
SECOND:	The document number of the corporation (if known): P01000057525			
THIRD;	The date dissolution was authorized: 12/31/2003			
	Effective date of dissolution if applicable: 12/31/2003 (no more than 90 days after dissolution	a lile date)	 .	
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for dissol	ution	
	Dissolution was approved by of the shareholders through voting groups.			
	The following statement must be separately provided for each voting group e to vote separately on the plan to dissolve:	entitled		
	The number of votes cast for dissolution was sufficient for approval by			
	(voting group)	TAL SE	200	
		LAH	96 NO	
	Signature: Claudin Medica	ίλκΥ ASSEI	8-1	דובע
	(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 tiduciary)	OF STATE, FLORI	2006 NOV -8 AM 10: 23	<u>'</u>
	CLAUDIA MEDINA	ĐΑ	ၽ	
	(Typed or printed name of person signing)			
	PRESIDENT			
	(Title of person signing)			

Filing Fee: \$35