

PO1000086065

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H11000153840 3)))



H110001538403ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : DORAL CORPORATE FILING SERVICE
Account Number : I20070000081
Phone : (305) 436-0979
Fax Number : (305) 592-5575

RECEIVED

11 JUN -9 AM 8:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**DISSOLUTION OR WITHDRAWAL
LIZ MANAGEMENT, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

FILED
11 JUN -9 PM 2:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

Valid

6-10/11
DC

H11000153840

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:

LIZ MANAGEMENT, INC.

SECOND: The document number of the corporation (if known): P01000086065

THIRD: The file date of the articles of incorporation: 08/29/2001

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.

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.)

ELIZABETH ZULETA

(Typed or printed name of person signing)

PRESIDENT

(Title of Person Signing)

Filing Fee: \$35

H11000153840

FILED
14 JUN -9 PM 2:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA