

P02000021454

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(Address)

(City/State/Zip/Phone #)

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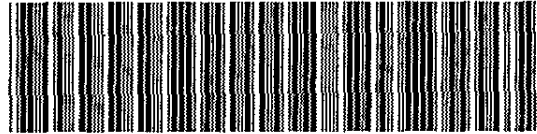
AUTHORIZATION BY PHONE TO

CORRECT eff date - 8/10/06

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EXPIRATION DATE
8/10/06

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION OF EASTERNSHORE ENTERPRISES OF FLORIDA, INC.

DOCUMENT NUMBER: P02000021454

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rosa Elena Leon

(Name of Contact Person)

EASTERNSHORE ENTERPRISES OF FLORIDA, INC.

(Firm/Company)

16132 NW 14 Court

(Address)

Pembroke Pines, Florida 33028

(City/State and Zip Code)

For further information concerning this matter, please call:

Rosa E. Leon

(Name of Contact Person)

at (954) 436-0936

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee ☒ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 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 607.1403, 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:

EASTERSHORE ENTERPRISES OF FLORIDA, INC.

SECOND: The document number of the corporation (if known): P02000021454

THIRD: The date dissolution was authorized: 08/02/2006

Effective date of dissolution if applicable: 08/10/2006

(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

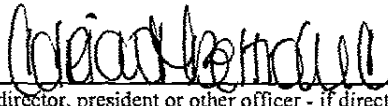
☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

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)

Adriana Beltran Canon

(Typed or printed name of person signing)

President

(Title of person signing)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 AUG 10 PM 2:41

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: EASTERSHORE ENTERPRISES OF FLORIDA, INC.

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:

As of this date no debts or claims whatsoever against the corporation are
pending.

After the dissolution of the corporation is accepted by the Department of State,
none of the Board of Directors can be held liable after the date of dissolution.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

960 Lavender Circle, Weston - Florida 33327

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.

Adriana Beltran Canon

Printed Name of the Person Filing

X 

Signature of the Person Filing