P02000055112

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	<u></u>
(Document Number)	
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Special Instructions to Filing Officer:	
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COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: AMERICAN VISA, INC.		
DOCUMENT NUMBER: P0200055112		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
MARIA GABRIELA LENZINA (Name of Contact Person)		
American Visa, LLC. (Firm/Company)		
530 Lincoln Rd #103 (Address)		
Miami BEACH, FL 33139 (City/State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Contact Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & Sertified Copy Certificate of Status Certified Copy (Additional copy is enclosed) 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 7661 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 State:	
	AMERICAN VISA, INC.	
SECOND:	The document number of the corporation (if known): POZOOSSIIZ	
THIRD:	The file date the articles of incorporation: MAY 17, Zoo Z	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	(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:		
Sign	(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.)	
MARIA GABRIELA LENZINA (Typed or printed name of person signing)		
PRESIDENT (Title of Person Signing)		

Filing Fee: \$35