

PO20000060309

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

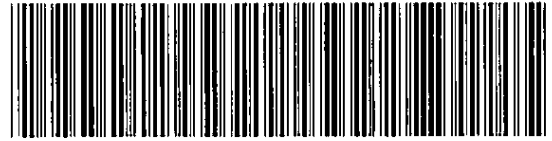
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10/24/23

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23 OCT 24 PM 6:40  
J. J. COTTE

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LA CRUZ DE HIALEAH, INC.

**DOCUMENT NUMBER:** P02000060309

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

Please return all correspondence concerning this matter to the following:

DELFINA C. SANTANA

(Name of Contact Person)

(Firm/Company)

6465 WEST 24 AVENUE, OFF 101

(Address)

HIALEAH, FLORIDA 33016

(City/State and Zip Code)

For further information concerning this matter, please call:

DELFINA C. SANTANA

(Name of Contact Person)

at ( 786 )

(Area Code)

255-3910

(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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

23 OCT 24 PM 6:40

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:  
LA CRUZ DE HIALEAH, INC.

SECOND: The document number of the corporation (if known): P02000060309

THIRD: The date dissolution was authorized: OCTOBER 23, 2023

Effective date of dissolution if applicable: \_\_\_\_\_  
(no more than 90 days after dissolution file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

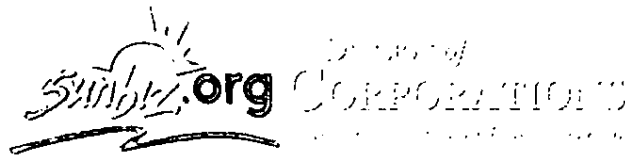
FOURTH: Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.

Signature: Delfina C. Santana  
(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)

Delfina C. Santana  
(Typed or printed name of person signing)

DIRECTOR  
(Title of person signing)

Filing Fee: \$35



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## Detail by Entity Name

Florida Profit Corporation  
LA CRUZ DE HIALEAH, INC.

### Filing Information

**Document Number** P02000060309  
**FE/EIN Number** 27-0057892  
**Date Filed** 05/31/2002  
**State** FL  
**Status** ACTIVE  
**Last Event** AMENDMENT  
**Event Date Filed** 02/06/2017  
**Event Effective Date** NONE

### Principal Address

6465 WEST 24TH AVE #101  
HIALEAH, FL 33016

### Mailing Address

P.O. BOX 161387  
HIALEAH, FL 33016

Changed: 05/22/2003

### Registered Agent Name & Address

SANTANA, DELFINA C  
6465 WEST 24TH AVE #101  
HIALEAH, FL 33016

Name Changed: 02/06/2017

Address Changed: 02/06/2017

### Officer/Director Detail

#### **Name & Address**

Title D

SANTANA, DELFINA C  
6465 WEST 24 AVENUE #101  
HIALEAH, FL 33016

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(Address)

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(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)

Delfina C. Santana

(Typed or printed name of person signing)

DIRECTOR

(Title of person signing)

**Filing Fee: \$35**