## P02000062141

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(City/State/Zip/Phone #)				
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Certified Copies	Certified Copies Certificates of Status			
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Special Instructions to	Filing Officer:			

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R. CONSTEL FEB 2 7 2007

## **COVER LETTER**

TO: Amendment Section Division of, Corporations SUBJECT: ALVERTEX INVESTMENTS, INC DOCUMENT NUMBER: P02000062141 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ISIS ISABEL (Name of Contact Person) PESTANOS OFFICE (Firm/Company) 7758 NW 44TH ST (Address) SUNRISE FL 33351 (City/State and Zip Code) For further information concerning this matter, please call: ISIS ISABEL at (954) 5780016

(Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: □\$35 Filing Fee ☑\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee, Certificate of Status & Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

## 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 Stat	e:
	ALVERTEX INVESTMENTS, INC.	
SECOND:	The document number of the corporation (if known): P02000062141	
THIRD:	The file date of the articles of incorporation: 06-05-2002	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	None of the corporation's shares have been issued.	07 FE
	The corporation has not commenced business.	823
FIFTH:	No debt of the corporation remains unpaid.	7
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	4: 25
SEVENTH:	Adoption of Dissolution (CHECK ONE)	
	A majority of the incorporators authorized the dissolution.	
	A majority of the directors authorized the dissolution.	
Sign	(By a director, president or other officer - if directors or officers have not been selected, by an incorporat in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	or - if
	ABNER AIVAREZ (Typed or printed name of person signing)	. ,
	PRESIDENT (Title of Person Signing)	

Filing Fee: \$35

## **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: ALVERTEX INVESTMEN	NTS INC.	
Date of dissolution will be the date the dissolution is filed with the specified in the <i>Articles of Dissolution</i> .	Department of State or a	s
Description of information that must be included in a claim:		
NONE		
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Mailing address where claims can be sent: (Claims cannot be sent	to the Division of Corpor	ations)
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A claim against the above named corporation will be barred unless within 4 years after the filing of this notice.	s a proceeding to enforce	the claim is commenced
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