P02000105496

· (Re	equestor's Name)	
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(Ad	ldress)	· ·
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(Cit	ry/State/Zip/Phon	e #)
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
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ALCAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: LORPORATE DUBSOLUTION					
DOCUMENT NUMBER: P02000105496					
The enclosed Articles of Dissolution and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
IVETTE CAPONE					
(Name of Contact Person)					
LOCONUT GROVE FUELS, INC. (Firm/Company)					
12305 Sours Divise Hwy (Address)					
(Address)					
<u>MiAMi 元 33156 - 5237</u> (City/State and Zip Code)					
(City/State and Zip Code)					
For further information concerning this matter, please call:					
YVETTE CAPONI at (305) 255.4145 (Name of Contact Person) (Area Code & Daytime Telephone Number)					
·					
Enclosed is a check for the following amount:					
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) Certificate of Status & Certified Copy (Additional copy is enclosed)					
MAILING ADDRESS: STREET ADDRESS:					
Amendment Section Amendment Section Division of Corporations Division of Corporations					
P.O. Box 6327 Clifton Building					
Tallahassee, FL 32314 2661 Evecutive Center Circle					

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

. . . 50%

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 Departmen	it of St	ate:	
	LOCONUT GROVE TURLS, INC.	_		
SECOND:	The document number of the corporation (if known): PO200010	2 <u>54</u>	190	,
ГHIRD:	The date dissolution was authorized: 4-19-57			
-	Effective date of dissolution if applicable: (no more than 90 days after dissolution)	tion file	date)	_
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes ca was sufficient for approval.	st for o	dissol	ution
	Dissolution was approved by the shareholders through voting groups.			
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	o entitl	led	
	The number of votes cast for dissolution was sufficient for approval by	SECRETAR)	07 APR 30	
	(voting group)		0 PM	Ш
S	Signature: Culte cilcle	OF STATE E. FLORIDA	3: 38	D
	(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)			
	CARLO = FONTE CILLA			
•	(Typed or printed name of person signing)			
_	PRESIDENT			
	(Title of person signing)			

Filing Fee: \$35