P0200118338

(Re	equestor's Name)	· · · ·
(Ad	ldress)	
(Ad	Idress)	
(Cit	ty/State/Zip/Phone) #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
· (Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



500270673265

03/20/15--01016--026 **35.00

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: CLOSE A BUSIN	NESS
DOCUMENT NUMBER: P02000	118338
The enclosed Articles of Dissolution and i	fee are submitted for filing.
Please return all correspondence concernin	g this matter to the following:
ORLANDO SOLER	
A. C. FAMILY HOME, I	Contact Person) NC
	n/Company)
1875 SW 59TH AVE	J.L., A
MIAMI, FL 33155	ddress)
	ate and Zip Code)
` •	•
For further information concerning this ma	tter, please call:
ORLANDO SOLER	at (786) 587-9084
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amou	nt:
■ \$35 Filing Fee ■ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 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: A. C. FAMILY HOME, INC					
SECOND:	n02000118338					
THIRD:	The date dissolution was authorized: 12/31/2014					
	Effective date of dissolution <u>if applicable</u> : 12/31/2014 (no more than 90 days after dissolution file)	e 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					
	ORLANDO SOLER					
5	(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) ORLANDO SOLER	TS MAR 20 PH 1: 04				
	(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 Corpo	oration: A. C. FAMILY F	HOME, INC		
	tion will be the date the dissolution is a Articles of Dissolution.	filed with the Department of State or as		
Description of	information that must be included in a	claim:		
THE BU	JSINESS WAS CLO	OSED		
				
Mailing addres	s where claims can be sent: (Claims ca	unnot be sent to the Division of Corporations)		
B	1875 SW 59TH A\	•	15 ∰	SEC 338
	MIAMI, FL 33155		MAR 20	第2元 第2元 第2元 第2元 第2元 第2元 第2元 第2元 第2元 第2元
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			1: 04	
	t the above named corporation will be after the filing of this notice.	barred unless a proceeding to enforce the claim is o	commer	nced
		M n		1
ORLAN	IDO SOLER	- Orluits		/ —
	Printed Name of the Person Filing	Signature of the Person Filing	,	

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00