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

TO: Amendment Section Division of Corporations
SUBJECT: A + M Properties, INC
DOCUMENT NUMBER: P02000121278
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Arige 1. So to (Name of Contact Person)
(Name of Contact Person)
A + M Properties, INC
(Firm/Company)
- 4224 Hollywood Block
(Name of Contact Person) A + M Properfies, Inc (Firm/Company) 4224 Holly wood Blub (Address) Holly wood, FL. 33021 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Angel Soto at (954) 559-2421
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) □ \$43.75 Filing Fee & Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

September 26, 2014

Angel Soto A & M Properties Inc. 4224 Hollywood Blvd. Hollywood, FL 33021

SUBJECT: A&M PRORECTIONS, INC.

Ref. Number: P02000

ocument for A&M PROPERTIES, INC. and your We have received you check(s) totaling \$43.75. lowever, the enclosed document has not been filed and is being returned for th. following correction(s):

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee. or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey Regulatory Specialist II

Letter Number: 714A00020703

ARTICLES OF DISSOLUTION

Pursuant to s	section 607.1403, Florida Statutes, this Florida profit corporation sublimited the following articles
oi dissolutio	2014 SEP 18 PM 3: 35
EIDOT.	2014 SET STATE
FIRST:	The name of the corporation as currently filed with the Florida Department of State ORIDA
	1+ + M troperties, inc
SECOND:	The document number of the corporation (if known): PO200121278
THIRD:	The date dissolution was authorized:
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file 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
	(voting group)
	/
S	Signature: V And 2 deep
	(By a dired presidence of other officer - if directors or officers have not been selected, by an incorporation in it in the hands of a receiver, trustee, or other court appointed fiduciary, by
	that fiduci
	Strank Soto
•	ped or printed name of person signing)
	$D \overset{\sim}{\sim} L$
	[resident
	(Title of person signing)

Filing Fee: \$35