P030000007944

| (Requestor's Name) | |
|---|---|
| (Address) | 1 1111111111111111111111111111111111111 |
| (Address) | |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | |
| | |
| | |
| Office Use Only Sharing | ion Co |
| 10 MD | |



600042702566

11/17/04--01017--021 **52.50

OL NOV 17 PM 3: 56

TRANSMITTAL LETTER

| TO: Amen | dment Section | | |
|------------------|---------------------------------------|--------------------------|-------------------------------|
| 1 | on of Corporations | | • |
| <u> </u> | • • | | |
| | | _ , , | |
| SUBJECT: C | LOSING CORPORATION | | |
| } | | • | |
| DOCUMENT | NUMBER: P0300000794 | 4 | |
| The enclosed A | Articles of Dissolution and | fee are submitted for t | filing. |
| Please return a | ll correspondence concernin | ng this matter to the fo | llowing: |
| | | | |
| / ! | | | |
| CARRIERE, BIA | | | |
| | (Name of | Person) | |
| TIERRAS DEL | VÔI CẠN CO | , | |
| TIERTO DEL | | Firm/Company) | |
| | (2 (000) | Tana Company) | |
| 1290WESTON | RD, STE 306 | | |
| | | (Address) | 1 |
| <u>.</u> | | • | |
| WESTON FLOR | | a / 17' a 1 | |
| <u> </u> | (City/ | State/and Zip Code) | i : · |
| For further infe | ormation concerning this ma | otter nlesse call | ļ |
| + In the last | Mination concerning and the | mor, proase carr. | |
| | | | : |
| MARIA C SANO | CHEZ | at (772) | 344-9217 |
| | (Name of Person) | (Area Code d | & Daytime Telephone Number) |
| | * * * * * * * * * * * * * * * * * * * | | |
| Enclosed is a c | heck for the following amou | unt: | 1 |
| □ \$35 Filing F | ee □\$43.75 Filing Fee & | ☐ \$43.75 Filing Fee | & \$52.50 Filing Fee, |
| ÷ | Certificate of Status | Certified Copy | Certificate of Status & |
| | • | (Additional copy is | |
| , | | enclosed) | (Additional copy is enclosed) |
| . MATT | ING ADDRESS: | • | STREET ADDRESS: |
| | dment Section | | Amendment Section |
| Divisi | on of Corporations | | Division of Corporations |
| | Box 6327 | | 409 E. Gaines Street |
| Tallah | assee, Florida 32314 | , | Tallahassee, Florida 32399 |

ARTICLES OF DISSOLUTION

| of dissolution | n: | ation scomits are | tonowing at | HCIC |
|----------------|---|--|----------------|----------|
| | | | | |
| FIRST: | The name of the corporation as currently filed with the D | epartment of Stat | | |
| | TIERRAS DEL VOLCAN, CO. | <u> </u> | LASE - | 7** |
| SECOND: | The document number of the corporation (if known): P03 | 3000007944 | OLNOVI/PM | |
| THIRD: | The date dissolution was authorized: 09/30/2004 | | STAT FLORE |) { 1 |
| | Effective date of dissolution if applicable: 11/08/2004 | · * * * * * * * * * * * * * * * * * * * | DE O | • |
| | (no more than 90 | days after dissolution f | ile date) | |
| FOURTH: | Adoption of Dissolution (CHECK ONE) | | | |
| | Dissolution was approved by the shareholders. The many was sufficient for approval. | umber of votes ca | st for dissolu | ition |
| | Dissolution was approved by of the shareholders thro | ugh voting groups | š . | |
| | ÷ % | | | |
| | The following statement must be separately provided y vote separately on the plan to dissolve: | for each voting gr | oup entitled | to |
| | | <u> </u> | | |
| | The number of votes cast for dissolution was sufficien | it for approval by | | |
| | | | | |
| | (voting group) | - [| | |
| | Signed this 08 TH day of NOVEMBER | 2004 | - | |
| | | 1 | | |
| Signati | | l l | | |
| ٠ | (By a director, president or other officer - if directors or officers have not if in the hands of a receiver, trustee, or other court appointed fiduciary, by | been selected, by an is y that fiduciary) | corporator – | |
| - | | : : | | |
| | CARRIERE, BIANCA R (Typed or printed name of person signing) | | | |
| | (13) for or branco name or bessen signisis) | | | |
| | DIRECTOR | | | |
| | (Title of person signing) | | | |
| | | , , | | |

Filing Fee: \$35

Notice of Corporate Dissolution

| This notice is s | submitted by the | e dissolved c | orporation nam | led below for resolut | ion of payment of unknown claim |
|--------------------------------|--|------------------|--------------------------|-----------------------|--|
| against this cor | poration as pro | vided in s. 60 | 07.1407, F.S. | | |
| This "Motion of | f <i>C</i> arnames Dis | no Indiana II in | antianal and ia | mat recovered without | iling a voluntary dissolution. |
| Ins Monce of | Corporate Dis | Sotution 12 | opuouat and is | not required when i | ing a voluntary dissolution. |
| • | _ | | . == | | 1 |
| Name of Corpo | ration: TIERRA | AS DEL VOL | CAN, CO. | | 4 |
| Ĭ Ş | | | e* | | 1 |
| | | | olution is filed | with the Departmen | t of State or as |
| specified in the | Articles of Dis | solution. | · · · | | , |
| Description of | : information tha | t must be inc | luded in a clair | m: | |
| • | | | <u>-</u> | | |
| DISSOLUTION | I MOUTE COTTA | T 041 CO #1 | Hedroadiena | ALOCO/ICANIAICS | |
| DISSOLUTION | I INSUFFICIEN | I SALES (H | URRICAN FRA | NCES/JEANNE) | |
| | | | | | 1 5 6 |
| | | | | | |
| <u> </u> | <u> </u> | | | 2 | |
| | - - 1 | | | | |
| | 1 | | <u> </u> | - | |
| | 1 | <u>.</u> ₩ | | | |
| | | | | | |
| | 4 | | | | \ |
| | † . | <u></u> | . 4 | | } |
| Mailing address | s where claims | can be sent: (| (Claims cannot | be sent to the Divis | ion of Corporations) |
| Mailing address | s where claims | can be sent: (| (Claims cannot | be sent to the Divis | ion of Corporations) |
| Mailing address | s where claims | | Claims cannot | be sent to the Divis | ion of Corporations) |
| Mailing address | P.O. BOX 709 | 6 | • | | ion of Corporations) |
| Mailing address | P.O. BOX 709 | 6 | Claims cannot | | ion of Corporations) |
| Mailing address | P.O. BOX 709 | 6 | 4985 | | ion of Corporations) |
| Mailing address | P.O. BOX 709 | 6 | • | | ion of Corporations) |
| Mailing address | P.O. BOX 709 | 6 | 4985 | | ion of Corporations) |
| Mailing address | P.O. BOX 709 | 6 | 4985 | | ion of Corporations) |
| | P.O. BOX 709 | 6 LUCIE, FL 3 | 4985 | | |
| A claim against | P.O. BOX 709 PORT SAINT the above name | LUCIE, FL 3 | 4985 on will be barre | d unless a proceedir | ion of Corporations) |
| | P.O. BOX 709 PORT SAINT the above name | LUCIE, FL 3 | 4985 on will be barre | d unless a proceedir | |
| A claim against | P.O. BOX 709 PORT SAINT the above name | LUCIE, FL 3 | 4985 on will be barre | d unless a proceedir | |
| A claim against | P.O. BOX 709 PORT SAINT the above name | LUCIE, FL 3 | 4985 on will be barre | d unless a proceedir | |
| A claim against is commenced v | P.O. BOX 709 PORT SAINT the above name within 4 years a | LUCIE, FL 3 | 4985 on will be barre | d unless a proceedir | |
| A claim against is commenced v | P.O. BOX 709 PORT SAINT the above name within 4 years a | EUCIE, FL 3 | 4985 on will be barre | d unless a proceedin | g to enforce the claim |
| A claim against is commenced v | P.O. BOX 709 PORT SAINT the above name within 4 years a | EUCIE, FL 3 | 4985 on will be barre | d unless a proceedin | |
| A claim against is commenced v | P.O. BOX 709 PORT SAINT the above name within 4 years a | EUCIE, FL 3 | 4985 on will be barre | d unless a proceedin | g to enforce the claim |

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