P0300008898

(Re	equestor's Name)	
(Ac	ldress)	-
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(Ci	ty/State/Zip/Phone	∋ #)
PICK-UP	MAIT	MAIL
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(Do	ocument Number)	
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations					
ATLANTIC HOME I	NVESTORS INC.				
SUBJECT:					
DOCUMENT NUMBER: P03000	0008898				
The enclosed Articles of Dissolution and i	ee are submitted for filing.				
Please return all correspondence concernin	g this matter to the following:				
Danilo Medic	n				
(Name of	Person)				
(Name of	Firm/Company)				
·	1 mile Company)				
819 NE 199 St #103	(Address)				
	(Audioss)				
Miami, FL 33179 (City/)	State/and Zip Code)				
, ·	•				
For further information concerning this ma	itter, please call:				
	655-2966				
Danilo Medic (Name of Person)	at (305) (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amou					
\$35 Filing Fee \$\simeg\$ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certified Copy Certificate of Status &				
	(Additional copy is Certified Copy enclosed) (Additional copy is				
	enclosed) (Additional copy is				
MAILING ADDRESS:	STREET ADDRESS:				
Amendment Section	Amendment Section				
Division of Corporations P.O. Box 6327	Division of Corporations 409 E. Gaines Street				
Tallahassee, Florida 32314	Tallahassee, Florida 32399				

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 Department of State: ANTIC HOME INVESTORS, INC.					
SECOND:	The document number of the corporation (if known): p0300008898					
THIRD:	The file date of the articles of incorporation was: 1/24/03					
FOURTH:	(CHECK AT LEAST ONE BOX)					
	☐ None of the corporation's shares have been issued. ☐					
	The corporation has not commenced business.					
FIFTH:	No debt of the corporation remains unpaid. The net assets of the corporation remaining after winding up have been distributed.					
SIXTH:	None of the corporation's shares have been issued. The corporation has not commenced business. No debt of the corporation remains unpaid. The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.					
SEVENTH:	Adoption of Dissolution (CHECK ONE)					
	A majority of the incorporators authorized the dissolution.					
	A majority of the directors authorized the dissolution.					
	Signed this day of January 2005					
Signatu	re: Megut 2.					
J	(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.)					
	Typed or printed name of person signing)					
	President Wegut 2. (Title of person/rigning)					
	11 or haronal sound					

Filing Fee: \$35

Dlease return copy with stamped file information LE NO CHARGE (self addressed stamped envelop enclosed) 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:	ATLANTIC HO	ME INVESTOR	SINC	<u>\</u> __	Ö	
Date of dissolution wi specified in the Article	Il be the date the dissolution es of Dissolution.	is filed with the De	epartment of State o	LAHAS	05 JAN 24	Π
Description of informa	ation that must be included in	n a claim:		SEE, FI	PX	
not applic	able	· · · · · · · · · · · · · · · · · · ·		ORDA	2: L 5	_
				<u>.</u>		
Mailing address where	e claims can be sent: (Claims	s cannot be sent to t	the Division of Corp	oorations)		
Att <u>ent</u> :	ion of					
	Medic 199 St #103 F33179					
MIAMI, 	F \$ 3 1 / 9		<u>-</u>	····		
	ove named corporation will 4 years after the filing of this		proceeding to enfor	ce the claim		
Danilo	o Medic	<i>U</i>	Megnt:	2.		
Printed N	ame of the Person Filing		Signature of the Pe	rson Filing		

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