## P03000067074

(Requestor's Name)	_	
(Address)	-	
(Address)	_	
(City/State/Zip/Phone #)	-	
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status	•	
Special Instructions to Filing Officer:		
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02/16/04--01064--007 \*\*35.00

FILED

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ALLASSEF FLORIDA

## TO: Amendment Section Division of Corporations DOCUMENT NUMBER: PO3000670 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Firm/Company) For further information concerning this matter, please call: Mayra Cortins at (786) 514-4719 (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: ☑\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee, Certificate of Status & Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section Amendment Section

Division of Corporations 409 E. Gaines Street

Tallahassee, Florida 32399

Division of Corporations

Tallahassee, Florida 32314

P.O. Box 6327

## 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:
	Taulag Landscaping INC.
SECOND:	The document number of the corporation (if known): PO 3000067074
THIRD:	The file date of the articles of incorporation was: 6-17-2003
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.
SIXTH:	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 21th day of Sanuary. 2004.
Signatur	(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.)
	Mayra Cortinas (Typed or printed name of person signing)
	Trespectation of person signing)  ATT THE ASSET OF THE STATE OF THE ST
	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 Corporation: Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) A claim against the above named corporation will be barred unless a proceeding to enforce the claim

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

is commenced within 4 years after the filing of this notice.