

P0300024022

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

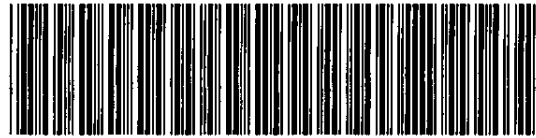
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/25/06--01058--004 ##43.75

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06 OCT 25 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Scharlacken & Associates
ATTORNEYS AT LAW

October 24, 2006

VIA FEDERAL EXPRESS

Florida Department of State
Division of Corporations
Amendment Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: DIANA LOPEZ TRUCKING, INC., FL. DOC. #P03000124022

Dear Sir or Madam:

The purpose of this letter is to file Articles of Dissolution and to request a certified copy of the Articles of Dissolution for the above referenced Florida corporation. Also enclosed is our firm check in the amount of \$43.75, to cover the appropriate fees.

Please return the requested documents in the postage pre-paid envelope enclosed for your convenience.

Thank you for your assistance in this matter.

Very truly yours,
SCHARLACKEN & ASSOCIATES


Lorna J. Scharlacken, Esq.
Licensed to Practice in Florida and New York
E-MAIL LORNA@SCHARLACKEN.COM
DIRECT (239) 598-2295

Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Diana Lopez Trucking, Inc.

DOCUMENT NUMBER: P03000124022

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lorna J. Scharlacken, Esq.

(Name of Contact Person)

Scharlacken & Associates

(Firm/Company)

8142 Lowbank Drive

(Address)

Naples, FL 34109

(City/State and Zip Code)

For further information concerning this matter, please call:

Lorna J. Scharlacken, Esq. at (239) 598-2295

(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 ☐ \$43.75 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

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ARTICLES OF DISSOLUTION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Diana Lopez Trucking, Inc.

SECOND: The document number of the corporation (if known): P03000124022

THIRD: The date dissolution was authorized: 10/01/2006

Effective date of dissolution if applicable: 10/01/2006
(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)

Signature: ARocha

(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)

Leticia Rocha

(Typed or printed name of person signing)

Personal Representative of the Estate of Diana Lopez

(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 Corporation: Diana Lopez Trucking, Inc.

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:

Description of Claim, Name of Claimant, Amount of Claim and Contact Information of Claimant.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Lorna J. Scharlacken, Esq.

Scharlacken & Associates

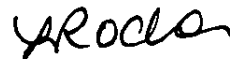
8142 Lowbank Drive

Naples, FL 34109

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Leticia Rocha, Personal Representative of the Estate of Diana Lopez

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