P04000008063

(Red	questor's Name)	
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(City	//State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: DISSOLUTION OF	- Korida Consorrion	
DOCUMENT NUMBER: PO4000	0008063	
The enclosed Articles of Dissolution and fee are	submitted for filing.	
Please return all correspondence concerning this r	matter to the following:	
JOSE A. B. Name of P	bin erson)	
(Name of Firm/C	TRACTORS, INC.	
4040 16 AI	1E, 3.6.	
HO40 16 Al (Address NAPLAS, FC. 3 (City/State/and	s) 3 <i>4</i> // 7 Zip Code)	
For further information concerning this matter, pl	ease call:	
TOSE A. Abra a (Name of Person)	at (<u>Z39</u>) <u>ZZ9-19F</u> (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
Certificate of Status Cer (Ad	3.75 Filing Fee & \$\sqrt{\$52.50}\$ Filing Fee, tified Copy ditional copy is closed)	
MAILING ADDRESS:	STREET ADDRESS:	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	409 E. Gaines Street	
Tallahassee, Florida 32314	Tallahassee, Florida 32399	

Tallahassee, Florida 32314

ARTICLES OF DISSOLUTION

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:		
	MOS J CONTRACTORS, INC.		
SECOND:	The document number of the corporation (if known): P0400008063		
THIRD:	The date dissolution was authorized: MARCH 30, 2005		
	Effective date of dissolution if applicable: MARCH 31, 2005 (no more than 90 days after dissolution file date)		
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	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 of the shareholders through voting groups. The following statement must be separately provided for each voting groups.		
	Dissolution was approved by of the shareholders through voting groups.		
	The following statement must be separately provided for each voting group and entitled to vote separately on the plan to dissolve:		
	The number of votes cast for dissolution was sufficient for approval by		
	(voting group)		
	Signed this 20 day of MARCH		
	Signature: (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)		
	JOSE A. AbiN		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(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: 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 is commenced within 4 years after the filing of this notice.

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