(Requestor's Name)	
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(Address)	- · · · · · · · · · · · · · · · · · · ·
(City/State/Zip/Phone #)	
PICK-UP WAIT M	AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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COVER LETTER

.. TO: Amendment Section

Division of Corporations BUSINESS CLOSED SUBJECT: DOCUMENT NUMBER: P04000011836 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: AUGUSTO CESPEDES (Name of Contact Person) CESVI FLOORING, INC. (Firm/Company) 3300 CIMARRON DRIVE (Address) ORLANDO FL 32829 (City/State and Zip Code) For further information concerning this matter, please call: at (321) 274-2628 (Area Code & Daytime Telephone Number) Augusto Cespedes (Name of Contact Person) Enclosed is a check for the following amount: \$35 Filing Fee \$\sum \$43.75 Filing Fee & \$\sum \$43.75 Filing Fee & \$\sum \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) **STREET ADDRESS: MAILING ADDRESS:** Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

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:
	CESVI FLOORING, INC
SECOND:	The document number of the corporation (if known): P04000011836
THIRD:	The date dissolution was authorized: 10/01/2011
	Effective date of dissolution <u>if applicable:</u> (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 emilled to vote separately on the plan to dissolve:
	The number of votes cast for dissolution was sufficient for approval by
	(voting group)
	Signature: Much South
	(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)
	Augusto Cespedes
	(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.

Name of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: CESVI FLOORING, 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:

Business lost revenue from contracts.

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

7961 Sloop Place # 106

Orlando FL 32825

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.

Augusto Cespedes

Printed Name of the Person Filing

Signature of the Person Filing