

PD4000052182

(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:

address removed from cover letters to protect
Ms. Jorge's identity. 7-13-04

Office Use Only



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04 JUN 23 PM 1:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7/1/04

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Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

June 17, 2004

To Whom It May Concern:

The attached forms are regarding the dissolution of Best Quality Investments. This corporation was fraudulently created with my name and previous address. I have nothing to do with this company or any of the people who filed the paperwork to get it incorporated. Please remove my name, address, and any other personal information you have in your systems for this corporation or any other which may have been created without my knowledge. I have never submitted paperwork of any type to the State of Florida to start any corporation of any type. I suggest you investigate the people at Express Corporate Filing Service, located at 1001 Ponce De Leon Blvd, Coral Gables FL. The person who supposedly filed this paperwork is Yanet Avila, who happens to work at this company. I have never been to these offices and have never signed any type of paperwork pertaining to this corporation. I have also filed a police report and a complaint with the FCC (Federal Trade Commission) regarding this matter.

In this day and age, I find it incredibly difficult to believe that all you need to start a corporation is a name and address. I have become a victim of identity fraud due to your lax system of accountability. I also find it very difficult to believe that I have to pay \$35 to remove this from your system.

I would appreciate your help in remedying this situation.

Sincerely,


Mariu Jorge

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Evadulant Corporation -
Best quality Investments

DOCUMENT NUMBER: P0400052182

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

Please return all correspondence concerning this matter to the following:

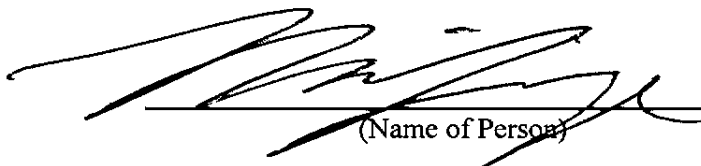
Marilu Jorge
(Name of Person)

N/A
(Name of Firm/Company)

(Address)

(City/State/and Zip Code)

For further information concerning this matter, please call:

 at () _____
(Name of 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, Florida 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
409 E. Gaines Street
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:

Best Quality Investments

SECOND: The document number of the corporation (if known): P04000052182

THIRD: The file date of the articles of incorporation was: 3/24/2004

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.

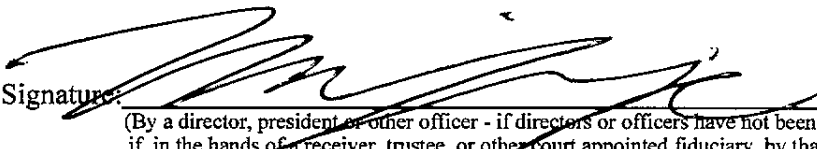
SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

☒ A majority of the incorporators authorized the dissolution.

☒ A majority of the directors authorized the dissolution.

Signed this 17 day of JUNE, 2004

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.)

Mariu Jorge
(Typed or printed name of person signing)

Fraud Victim
(Title of person signing)

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TALLAHASSEE, FLORIDA

Filing Fee: \$35