

PO4000089566

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

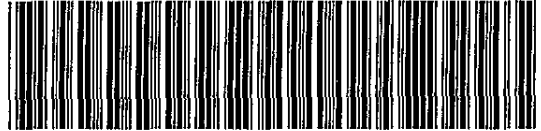
(Document Number)

Certified Copies _____

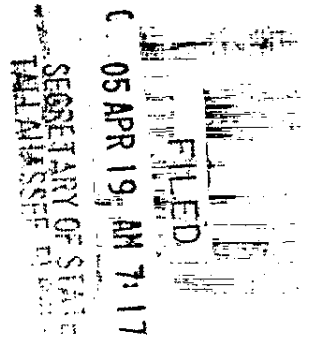
Certificates of Status _____

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03/14/05--01056--004 **35.00

diss.

C. Coulllette APR 19 2005



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

March 21, 2005

ADA ESTRADA
APC ACCOUNTING SERVICES
15128 SW 72 ST.
MIAMI, FL 33193

SUBJECT: K WORLD INSURANCE AGENCY CORP.
Ref. Number: P04000089566

We have received your document for K WORLD INSURANCE AGENCY CORP. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Where is your original of this photocopy? We must have original signature of officer/director before your document may be filed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Document Specialist

Letter Number: 405A00019037

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: K WORLD INSURANCE AGENCY CORP

DOCUMENT NUMBER: P04000089566

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

Please return all correspondence concerning this matter to the following:

ADA ESTRADA

(Name of Person)

APC ACCOUNTING SERVICES

(Name of Firm/Company)

15128 SW 72 ST

(Address)

MIAMI, FL 33193

(City/State/and Zip Code)

For further information concerning this matter, please call:

ADA ESTRADA

(Name of Person)

at (305) 382-4040

(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

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: K WORLD INSURANCE AGENCY

DOCUMENT NUMBER: P04000089566

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

Please return all correspondence concerning this matter to the following:

KADIOLNI ROJAS

(Name of Person)

(Name of Firm/Company)

1238 SW 74 CT

(Address)

MIAMI, FL 33144

(City/State/and Zip Code)

For further information concerning this matter, please call:

KADIOLNI ROJAS at (786) 547-33-75

(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)

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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:

K WORLD INSURANCE AGENCY

SECOND: The document number of the corporation (if known): P04000089566

THIRD: The file date of the articles of incorporation was: 06/08/2004

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.

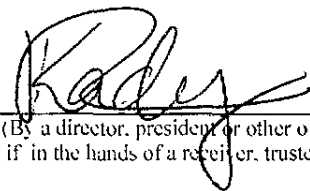
SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

☐ A majority of the incorporators authorized the dissolution.

☒ A majority of the directors authorized the dissolution.

Signed this 28 day of FEBRUARY, 2005.

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.)

KADIOLNI ROJAS

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

FILED
05 APR 19 AM 7:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA