## Po4000116530

questor's Name)	
dress)	
dress)	
y/State/Zip/Phone	e#)
☐ WAIT	MAIL
siness Entity Nar	me)
cument Number)	
Certificates	s of Status
Filing Officer.	
	dress)  dress)  y/State/Zip/Phone  WAIT  siness Entity Nar  cument Number)

Office Use Only



800043833478



01/13/05--01036--003 \*\*35.00

1618/27/C



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 19, 2005

CARLOS SANTANA 27435 KIRKWOOD CIRCLE WESLEY CHAPEL, FL 33543

SUBJECT: PERFECT SQUARE, INC.

Ref. Number: P04000116530

We have received your document for PERFECT SQUARE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6880.

Karen Gibson Document Specialist

Letter Number: 105A00003512

## TRANSMITTAL LETTER

TO: Amendment Section

Tallahassee, Florida 32314

Division of Corporations	
SUBJECT: Dissolution	of Perfect Square, Inc.
DOCUMENT NUMBER: POL	1000116530
The enclosed Articles of Dissolution and i	fee are submitted for filing.
Please return all correspondence concernin	g this matter to the following:
Carlos Santana (Name of	
(Name of	Person)
(Name of	Firm/Company)
(Ivalile of	· .
27435 kiek wood C	incle
27435 kick wood C Wesley Chapel FL (City/s	(Address)  33543  State/and Zin Code)
For further information concerning this ma	tter, please call:
Carlos Pantana	at (813)918-0636
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amou	ant:
\$35 Filing Fee \$\omega\$ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 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	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:  PERFECT Square, Inc.
SECOND:	The document number of the corporation (if known): PO4 000 116530
THIRD:	The file date of the articles of incorporation was: 08/09/2004
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.
SIXTII:	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.
Signatui	re:  (By a director, president wither officer - it directors or officers have not been selected, by an incorporator - if in the hards of a receiver trustee, of other court appointed fiduciary, by that fiduciary.)
	Carles Pantana (Typed or printed name of person signing)
	CIUNER (Title of person signing)