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(Re	questor's Name)	
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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## **COVER LETTER**

Division of Corporations	•
SUBJECT: IMMIGRATION ASSISTANCE, PA	-DISSOLUTION C CORPORPTION
DOCUMENT NUMBER: <u>P05000 11802</u>	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
RENGE CASTLEBERRY (Name of Contact Person)	
IMMIGRATION ASSISTANCE, P.F. (Firm/Company)	}.
17637 Chisholm Ln. (Address)	
Southbridge, VA 22026 (City/State and Zip Code)	- -
For further information concerning this matter, please call:	
RENEE (ASTUBLE Reg. at (703) 221- (Name of Contact Person) (Area Code & Dayt	6630 ime Telephone Number)
Enclosed is a check for the following amount:	
(Additional copy is Ce enclosed) (Additional copy is Ce	(2.50 Filing Fee, rtificate of Status & rtified Copy dditional copy is nclosed)
P.O. Box 6327 Clifton Bui Tallahassee, FL 32314 2661 Exect	nt Section f Corporations

## 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 the Florida Department of State:
	IMMIGRATION ASSISTANCE, P.A.
SECOND:	The document number of the corporation (if known): POSODOV 11802
THIRD:	The file date the articles of incorporation: 1/19/2005
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.
	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.
Signa	(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.)  RENEE TANUA CASTABLEM  (Typed or printed name of person signing)
	President/SECRETARY/TREASURER/DIRECTOR

Filing Fee: \$35