

P05000088104

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

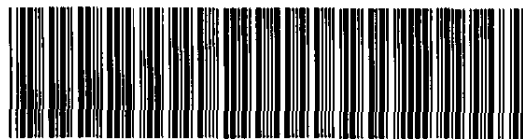
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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SEP 10 2010

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** M & S Carriers, Inc.

**DOCUMENT NUMBER:** P050000088104

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

Please return all correspondence concerning this matter to the following:

Sabrina Morales

(Name of Contact Person)

M & S Carriers, Inc.

(Firm/Company)

2400 SW 131st Place

(Address)

Miami, FL 33175

(City/State and Zip Code)

For further information concerning this matter, please call:

Sabrina Morales at ( 305 ) 781-3202

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$35 Filing Fee   ☐ \$43.75 Filing Fee &   ☐ \$43.75 Filing Fee &   ☐ \$52.50 Filing Fee,  
Certificate of Status   Certified Conv   Certificate of Status &

## 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:  
M & S Carriers, Inc.

SECOND: The document number of the corporation (if known): P050000088104

THIRD: The date dissolution was authorized: 5/1/10

Effective date of dissolution if applicable: \_\_\_\_\_  
(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 entitled to vote separately on the plan to dissolve:*

The number of votes cast for dissolution was sufficient for approval by

\_\_\_\_\_  
(voting group)

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)

Sabrina A. Morales

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35

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