

P05000100354

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

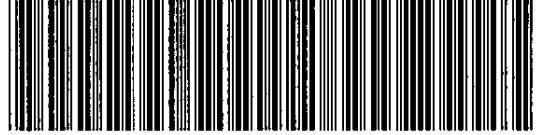
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 JUN 17 AM 9:41

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Diss.

TB

6/18/09

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT:

OT PICK -UP DELIVERIES INC

DOCUMENT NUMBER: P05000100354 The

enclosed **Articles of Dissolution** and fee are submitted for filing. Please return all
correspondence concerning this matter to the following:

OLGA L TORRES

26500 SW 133 AVE

HOMESTEAD, FL 33032

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 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Department of State:

OT PICK-UP DELIVERIES INC

SECOND: The document number of the corporation (if known): P05000100354

THIRD: The date dissolution was authorized: MAY 27, 2009

Effective date of dissolution if applicable: MAY 27, 2009

(no more than 90 days after dissolution file date)

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TALLAHASSEE, FLORIDA

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ (X) Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ () Dissolution was approved by of the shareholders through voting groups.

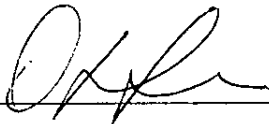
The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

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

(voting group)

Signed this 12TH day of JUNE, 2009

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)

(Typed or printed name of person signing)

OLGA L TORRES

(Title of person signing)

PRESIDENT