

(Requestor's Name)	
(Address)	_
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(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	1
(Document Number)	}
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Special Instructions to Filing Officer:	
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** SUBJECT: DEBESA APPLIANCE SERVICE AND REPAIR CORP DOCUMENT NUMBER: P05000126901 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RAMON M DEBESA (Name of Contact Person) (Firm/Company) 150 EAST 1 AVE # 213 (Address) HIALEAH, FL 33010 (City/State and Zip Code) For further information concerning this matter, please call: RAMON M DEBESA (Area Code & Daytime Telephone Number) (Name of Contact Person) 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 Copy Certificate of Status & Certified Copy (Additional copy is (Additional copy is enclosed) enclosed) STREET ADDRESS: MAILING ADDRESS:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

5*		FILE
•	ARTICLES OF DISSOLUTION	ZOOG OCT -5 AM 9:3
Pursuant to section 607.1401, articles of dissolution:	Florida Statutes, this Florida profit corporation sul	bmits the following Floring

articles of dissolution: FIRST: The name of the corporation as currently filed with the Florida Department of State: DEBESA APPLIANCE SERVICE AND REPAIR CORP The document number of the corporation (if known): P05000126901 SECOND: The file date of the articles of incorporation: 09/14/2005THIRD: 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 SIXTH: to the shareholders, if shares were issued. Adoption of Dissolution (CHECK ONE) **SEVENTH:** A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution. 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.) RAMON M DEBESA (Typed or printed name of person signing)

Filing Fee: \$35

(Title of Person Signing)

PRESIDENT

## **Notice of Corporate Dissolution**

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corpora	ntion: DEBESA APPLIANCE S	SERVICE AND	REPAIR CORP
	on will be the date the dissolution is filed articles of Dissolution.	with the Department of	State or as
Description of in	formation that must be included in a claim	1:	
N/A			
Mailing address	where claims can be sent: (Claims cannot	be sent to the Division	of Corporations)
_	N/A		·
		* *************************************	<u></u>
-			
	the above named corporation will be barre	ed unless a proceeding t	o enforce the claim is commenced
RAMON M	DEBESA		201/
	Printed Name of the Person Filing	Signa	ture of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00