# P05000141965

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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates of Status	
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Special Instructions to	Filing Officer:	

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SECRETARY OF STATE

ALLAMASSEE FLORIDA

Diss/notice

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of MCU Services, Inc.

DOCUMENT NUMBER: P05000141965

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

Please return all correspondence concerning this matter to the following:
Mabel Hincapie
(Name of Contact Person)
MCU Services, Inc.
(Firm/Company)
14581 SW 38 Street
(Address)
Miramar, FL 33027
(City/State and Zip Code)
For further information concerning this matter, please call:
Mabel Hincapie at ( 954 ) 447-2577
(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 Copy Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)

### **MAILING ADDRESS:**

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## **STREET ADDRESS:**

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# 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:
	MCU Services, Inc.
SECOND:	The document number of the corporation (if known): P05000141965
THIRD:	The date dissolution was authorized: 01/01/2007
	Effective date of dissolution if applicable: UPON RECEIPT (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
	President is sole owner & has all shares
	(voting group)  ANASSE  TILE  TILE
	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)
	Mabel Hincapie
	(Typed or printed name of person signing)
	President & owner
	(Title of person signing)

Filing Fee: \$35

# **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 Corporation: MCU Services, Inc.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.
Description of information that must be included in a claim:
Date of claim, type of claim, amount, reason for the claim, whom (name,
address and phone number). No claims should be outstanding as nothing
was purchased and the business was solely used for inbound customer
service.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  14581 SW 38 Street, Miramar, FL 33027
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
Mabel Hincapie  Printed Name of the Person Filing  Signature of the Person Viling
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Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00