P05000 H2825

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cil	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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SECRETARY OF STATE
ALLAHASSEE FLORING

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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: SUZZi Accessories Bayride, Inc.		
DOCUMENT NUMBER: P05000142825		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Isnor Oliveira		
(Name of Contact Person)		
(Firm/Company)		
240 71 st Street (Address)		
(Address)		
Miami Beach, FL 33141 (City/State and Zip Code)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Isnov Oliveiva at (786) 344-5942		
(Name of Contact Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
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MAILING ADDRESS: STREET ADDRESS:		
Amendment Section Amendment Section		
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building		
Tallahassee, FL 32314 2661 Executive Center Circle		

Tallahassee, FL 32301

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:
	5077 Accessories Bapsince, Drc.
SECOND:	The document number of the corporation (if known): Pos and 142825
THIRD:	The file date of the articles of incorporation: 10/19/05
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. ω
Signa	ature:
	(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.)
	Tshov Olivei'ka (Typed or printed name of person signing)
	President (Title of Person Signing)

Filing Fee: \$35