P06000015359

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

ANT DISS (101.28.08

COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATIO **DOCUMENT NUMBER:** The enclosed Articles of Revocation of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: 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: Street Address:** Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

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:	
	Alejandro Broche, P.A.	
SECOND:	The document number of the corporation (if known): P06000015359	
THIRD:	The file date of the articles of incorporation: 1/31/2006	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	None of the corporation's shares have been issued.	
	None of the corporation's shares have been issued. The corporation has not commenced business.	3
FIFTH:	No debt of the corporation remains unpaid.	_
SIXTH:	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.	
Sign	ature:	
- 10-1	(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.)	
	Alejandro Broche	
	(Typed or printed name of person signing)	
	President/Owner	_
	(Title of Person Signing)	

Filing Fee: \$35