

POLWOODDY 0929

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800155983708

05/18/09--01010--004 **35.00

VD/withhold

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 JUN -5 AM 9:12

Roberts JUN 08 2009



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 26, 2009

ROSA M. GRANT
DE LA ROSA'S 2 DESIGN HEAVENLY CLEAN
900 NE 18 AVE #17
HOMESTEAD, FL 33033

SUBJECT: DE LA ROSA'S 2 DESIGN HEAVENLY CLEAN INC.
Ref. Number: P06000040929

We have received your document for DE LA ROSA'S 2 DESIGN HEAVENLY CLEAN INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

It appears that you referred to the wrong document number. Please correct your form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 609A00017656

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 JUN -5 AM 3:00

REC'D

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Business

DOCUMENT NUMBER: G060979900134

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

Please return all correspondence concerning this matter to the following:

Rosa M Grant
(Name of Contact Person)

DE LA ROSA'S 2 DESIGN HEAVY CLEAN INC
(Firm/Company)

900 NE 18 AVE # 17
(Address)

HOUSTEAD, FL 33033
(City/State and Zip Code)

For further information concerning this matter, please call:

Rosa M Grant at (786) 715 6611
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (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 607.1401, 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:
DE LA ROSA'S 2 DESIGN HEAVENLY CLEAN INC.

SECOND: The document number of the corporation (if known): PO6000040929

THIRD: The file date of the articles of incorporation: 3/2/06 *THANK YOU.*

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.

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.

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
09 JUN -5 AM 9:12

Signature: *Rosa M Grant*
(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.)

ROSA M GRANT
(Typed or printed name of person signing)

OWNER / Pres.
(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: DE LA ROSA'S DESIGN HEAVENLY CLEAN 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:

Rosa M. Grant wants to dissolve De La Rosa's 2 Design Heavenly Clean Inc. She wants to make sure she is not charged the filing fee. Enclosed is a check for the filing fee of \$35.00.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

ROSA M. GRANT
900 NE 18 AVE # 17
HOMESTEAD, FL 33033

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.

ROSA M. GRANT

Printed Name of the Person Filing

Rosa M. Grant

Signature of the Person Filing

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