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TS Silvalor

COVER LETTER

TO: Amendment Section	
Division of Corporations	
SUBJECT: Disso (0710)	
DOCUMENT NUMBER: 704000	04401
The enclosed Articles of Dissolution and fee an	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
Piedad Lopez D	e pineda
(Name of Conta	act Person)
"THE CIMA" MULTIS	2 41, 201213
(Firm/Co	npany)
BAIJ NM SADL V6	<u>D</u>
(Addres	s)
(000: 500)N(1 E1 7	7065
CORAL SPRINKS, FL 33065 (City/State and Zip Code)	
For further information concerning this matter, please call:	
	at ()
(Name of Contact Person)	at () (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
(Ad	3.75 Filing Fee & S52.50 Filing Fee. rtified Copy Certificate of Status & Certified Copy (ditional copy is closed) (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:
	"THE CIMA" MULTISERVICIOS, INC
SECOND:	The document number of the corporation (if known): 706 0000 44011
THIRD:	The file date of the articles of incorporation: _03 28 06
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)
	\square A majority of the incorporators authorized the dissolution.
	\square A majority of the directors authorized the dissolution. \square
Sign	(By a director, president or other othicer - 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.)
	TIEDAD WERE DE PINEDA (Typed or printed name of person signing)
	Title of Person Signing)

Filing Fee: \$35