Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0380

From:

Account Name : BARINAS & ASSOCIATES INC.

Account Number : 120000000082 Phone : (305)871-0889

Fax Number : (305)871-0889

Estimated Charge

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DISSOLUTION OR WITHDRAWAL

HECTOR & N.L.N. CO.

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\$43.75

COVER LETTER

FO: Amendment Section				
Division of Corporations				
SUBJECT: HECTOR & N.L.N.,CO.				
DOCUMENT NUMBER: P06000080983				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
JANELLE BARINAS				
(Name of Contact Person)				
BARINAS & ASSOCIATES INC				
(Firm/Company)				
5701 NW 36TH ST				
(Address)				
VIRGINIA GARDENS, FL 33166				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
JANELLE BARINAS at (305) 871-0889				
(Name of Contact Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
\$35 Filing Fee \$\bigsiz \\$43.75 Filing Fee & \bigsiz \\$43.75 Filing Fee & \bigsiz \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)				
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, 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
	HECTOR & N.L.N. CO.
SECOND:	The name of the corporation as currently filed with the Florida Department of State: HECTOR & N.L.N. CO. The document number of the corporation (if known): P06000080983 The date dissolution was authorized: 09/22/2007 Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)
THIRD:	The date dissolution was authorized: 09/22/2007
	Effective date of dissolution if applicable: (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
	(voting group)
	•
	ille
	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)
	HECTOR M. ECHEVERRIA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of nerson signing)

Filing Fee: \$35

Notice of Corporate Dissolution

	oration as provided in s. 607.1407, F.S.	HOWN CIAINS
This "Notice of C	Corporate Dissolution" is optional and is not required when filing a voluntary disso	lution.
Name of Corpora	ation: HECTOR & N.L.N. CO.	
	on will be the date the dissolution is filed with the Department of State or as Articles of Dissolution.	
Description of in	nformation that must be included in a claim:	
DISSOLUT	ION WAS APPROVED AND FILED ON 09/22/2007.	
THE CON	MPANY WILL NOT BE DOING BUSINESS ANY	MORE.
WE DO N	OT HAVE ANY LIABILITIES.	
***		<u></u>
Mailing address	where claims can be sent: (Claims cannot be sent to the Division of Corporations)	
	7667 MIRAMAR PARKWAY	
	MIAMI, FL 33023	
	the above named corporation will be barred unless a proceeding to enforce the claim fier the filing of this notice.	n is commenced
HECTOR N	M. ECHEVERRIA, PRESIDENT	
	Printed Name of the Person Filing Signature of the Person Fili	ng

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