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To:

Division of Corporations

: (850)617-6380 Fax Number

From:

: BARINAS & ASSOCIATES INC. Account Name

Account Number 120000000082 (305)871-0889 Phone

: (305)870-9623 Fax Number

DISSOLUTION OR WITHDRAWAL

H P AIRCRAFT CONSULTANT CORP

Certificate of Status	1
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Estimated Charge	\$43.75

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COVER LETTER

TO: Amendment Section	
Division of Corporations	
SUBJECT: H P AIRCRAFT CONSULTANT	CORP
DOCUMENT NUMBER: P06000156132	
The enclosed Articles of Dissolution and fee are submit	ited for filing.
Please return all correspondence concerning this matter	to the following:
JANELLE BARINAS	
(Name of Contact Perso	on)
BARINAS & ASSOCIATES INC	
(Firm/Company)	•
5701 NW 36TH ST	
(Address)	
VIRGINIA GARDENS, FL 33166	
(City/State and Zip Co	ode)
For further information concerning this matter, please ca	all:
	05) 871-0889
(Name of Contact Person) (A	Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Sample 43.75 Filing Fee & \$43.75 Filing Fee & \$43.75 Filing Fee & Certificate of Status (Additional enclosed)	Copy Certificate of Status & Certified Copy
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 Tallahassec, 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:
	H P AIRCRAFT CONSULTANT CORP
SECOND:	The document number of the corporation (if known): P06000156132
THIRD:	The date dissolution was authorized: 11/06/2007
	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)
	TED LED
	Signature: (By a director, bresident or other officer - if directors or officers have not been selected, by an incorporator off in the hands of a receiver, trustee, or other court appointed fiduciary, by
	that fiduciary)
	JOSE RODRIGUEZ
•	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

Filing Fee: \$35

3058709623

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: H P AIRCRAFT CONSULTANT CORP
Date of dissolution will be the date the dissolution is filed with the Department of State or as pecified in the Articles of Dissolution.
Description of information that must be included in a claim:
DISSOLUTION WAS APPROVED AND FILED ON 11/06/2007.
THE COMPANY WILL NOT BE DOING BUSINESS ANY MORE.
WE DO NOT HAVE ANY LIABILITIES.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
P.O. BOX 941134
MIAMI FL 33194
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.
JOSE RODRIGUEZ
Printed Name of the Person Filing Signature of the Person Filing