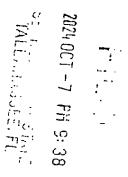
P0700004956

(Re	equestor's Name)	
(Ad	idress)	
(Ád	ddress)	
(Cit	ty/State/Zip/Phone #)	
(Cit	.y/State/Zip/Pflotte #)	
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name)	
(00	ocument Number)	
(50	rodiniona redinion,	
Certified Copies	Certificates o	of Status
Special Instructions to Filir	ng Officer:	-
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Office Use Only



100437637791





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CAPITAL CONNECTION, INC.417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

LOS AMIGOS MEXICAN RESTAURAN	Γ, INC.
Please Debit FCA000000003 For: 35	
Thank you Seth Neeley	
1.41	
Stoff	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art, of Amend, File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
,	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
Signature	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
	UCC 11 Search
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Los Amigos N	fexican Restaurant, In	nc.	
DOCUMENT NUMBE	P07000004956		
The enclosed Articles of	Dissolution and	fee are submitted for filin	g.
Please return all correspo	ndence concernin	g this matter to the follow	ving:
Nathan G. Nolin			
	(Name of	Contact Person)	
Attorney at Law			
	(Fin	n/Company)	
P.O. Box 876			
	(A	ddress)	
Graceville, Florida 32440			
	(City/Sta	te and Zip Code)	
For further information c	oncerning this ma	tter, please call:	
Nathan G. Nolin		850-209-7153 at (
(Name of Cont	act Person)		(Daytime Telephone Number)
Enclosed is a check for th	e following amou	nt:	
□ \$35 Filing Fee □ \$43 Cert	3.75 Filing Fee & ificate 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:		Street Address:	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: LOS AMIGOS MEXICAN RESTAURANT, INC.						
	· · · · · · · · · · · · · · · · · · ·		_				
SECOND:	The document number of the corporation (if known):						
THIRD:	September 25, 2024						
	Effective date of dissolution if applicable: September 25, 2024						
	(no more than 90 do Note: If the date inserted in this block does not meet the applicable statute not be listed as the document's effective date on the Department of State's	ory filing require	n file da ments, t	te) this date will			
FOURTII:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.						
			2021-OCT	4-4 W W , 4 - 1-44			
		•	-7	· -			
			F::	•			
			် မ				
S	Signature: Barbara & Spicer		·				
	(By a director, president so other officer - if directors or officers have not an incorporator - if in the hands of a receiver, trustee, or other court appoint that fiduciary)	been selected, by nted fiduciary, by					
	Barbara J. Spivey						
·	(Typed or printed name of person signing)	-					
I	President/Sole Shareholder						
-	(Title of person signing)	· <u> </u>					

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: LOS AMIGOS MEXICAN RESTAURANT, INC. The above named corporation is the subject of dissolution and the effective date of a dissolution is: (date filed with the Dept. if date specified in the Articles of Dissolution) Description of information that must be included in a claim: Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations) P.O. Box 876, Graceville, Florida 32440 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.

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

Barbara J. Spivey

Printed Name of the Person Filing