PONDOOIZIIZ

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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Aug 31, 2012

COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: Dissolution of Joli & Velazo	quez, PA	
DOCUMENT NUMBER: P07000012112		
The enclosed Articles of Dissolution and fee are sub	omitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
MAYRA JOLI (Name of Contact P		
(Name of Contact P	erson)	
Johi & Velazquez PA		
Johi & Velazquez PA (Firm/Company)		
1221 Brickell Quenue, (Address)	Suite 1210	
Miari, FL 33	3131	
(City/State and Zip	o Code)	
For further information concerning this matter, pleas	e call:	
MAYRA JOLI at ((Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
	ed 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 Tallahassee, FL 32301	

ARTICLES OF DISSOLUTION

EFFECTIVE DATE

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:
	Joli & Velazquez, PA
SECOND:	The document number of the corporation (if known): P07000012112
THIRD:	The date dissolution was authorized: August 27, 2012
	Effective date of dissolution <u>if applicable</u> : August 31, 2012 (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) (voting group)
	6 20 C
	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)
	(Typed or printed name of person signing)
	TYES (DENH (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: Joli & Velazquez, PA 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: Name of claimant, nature of claim and amount of claim. Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 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