P670000321945

. (I	Requestor's Name)
(/	Address)
(/	Address)
(0	City/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
J)	Business Entity Name)
I)	Oocument Number)
Certified Copies	Certificates of Status
Special Instructions t	to Filing Officer:

Office Use Only



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COVER LETTER

TO: Amendment Section

·Division of Corporations	
SUBJECT: PUROS FINE CIGARS AND WINE	COMPANY
DOCUMENT NUMBER: P07000032945	
The enclosed Articles of Dissolution and fee are submitted f	or filing.
Please return all correspondence concerning this matter to the	e following:
ANDREA H. ALCORTA	
(Name of Contact Person)	
PUROS FINE CIGARS AND WINE COMPAN	NY
(Firm/Company)	
7355 SW 89 STREET, SUITE 401	
(Address)	of a sign of the s
MIAMI, FL 33156	
(City/State and Zip Code)	:
For further information concerning this matter, please call:	
	715-9920
(Name of Contact Person) (Area C	Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
▼\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing I Certified Copy (Additional copenciosed)	
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 of dissolution	section 607.1403, Florida Statutes, this Florida profit corporation subfines the following articles on: **TALLAHASSEF** STATE ARTICLES OF DISSOLUTION **TOTAL PROFITS OF TARTICLES OF TARTY O
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	PUROS FINE CIGARS AND WINE COMPANY
SECOND:	The document number of the corporation (if known): P07000032945
THIRD:	The date dissolution was authorized: JULY 21, 2009
	Effective date of dissolution <u>if applicable:</u> JULY 21, 2009 (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)
;	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)
	ANDREA H. ALCORTA (Typed or printed name of person signing)
	PRESIDENT
	(Title of person cigning)

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: PUROS FINE CIGARS AND WINE COMPANY 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, ADDRESS, AND TELEPHONE NUMBER OF CLAIMANT. DATE AND NUMBER OF INVOICE IF APPLICABLE. AMOUNT OF CLAIM. DECRIPTION OF MERCHANDISE OR SERVICES RENDERED RELATED TO SAID CLAIM Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) ANDREA H. ALCORTA 7355 SW 89 STREET **SUITE 401** MIAMI, FL 33156 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

ANDREA H. ALCORTA

Printed Name of the Person Filing

Signature of the Person Filing