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COVER LETTER

TO: Amendment Section

Division of Corporations SOUTH FLORIDA WORKERS, CORP. SUBJECT: __ P07000051851 DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: OSCAR DAVID MUNOZ (Name of Contact Person) (Firm/Company) 13278 SW 30th STREET (Address) MIAMI, FLORIDA 33175 (City/State and Zip Code) For further information concerning this matter, please call: at (786) 282-8989 **DELIANA ROJAS** (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: ✓\$35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (Additional copy is (Additional copy is enclosed) enclosed) STREET ADDRESS: **MAILING ADDRESS:** Amendment Section Amendment Section **Division of Corporations** Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

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:		
	SOUTH FLORIDA WORKERS, CORP.		
SECOND:	. , ,		
THIRD:	The date dissolution was authorized: 05/01/08		
	Effective date of dissolution if applicable: 05/01/08 (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		
	N/A A		
	Signature: (By a-director, president of 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)		
	OSCAR DAVID MUNOZ		
	(Typed or printed name of person signing)		
	REGISTERED AGENT/ VICE-PRESIDENT		
	(Title of person signing)		

Filing Fee: \$35