7010060888

(Re	equestor's Name)	,	_
(Ac	ldress)		_
(Ac	ldress)		_
(Cit	ty/State/Zip/Phone	e #)	-
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	ne)	_
, 1860	ocument Number)		_
Certified Copies	_ Certificates	of Status	_
Special Instructions to	Filing Officer:		7
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COVER LETTER

TO: Amendment Section Division of Corporations	
Division of Corporations	
SUBJECT: ANGEL'S RESTAURANT.	Businees Solutions, co,
DOCUMENT NUMBER: P070000	60888
The enclosed Articles of Dissolution and fee are submitted	d for filing.
Please return all correspondence concerning this matter to	the following:
Mon Reyes (Name of Contact Person)	PA.
(Name of Contact Person)	
·•	
(Firm/Company)	
5035 PA/M (Address)	AVE
(Address)	
- Hislash, Pl.	33012
(City/State and Zip Code	
For further information concerning this matter; please call:	
Mame of Contact Person) at (30)	5 822-0669
(Name of Conact Terson)	a Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	•
\$35 Filing Fee \$\sum \\$43.75 Filing Fee & \$\sum \\$43.75 Filing Certificate of Status Certified Cop (Additional control enclosed)	
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee FL 32314	2661 Evecutive Center Circle

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:			
	ANGEL'S RESTAURANT BUSINESS SOLUTIONS, COPP	1		
SECOND:	The document number of the corporation (if known): P0700060888	_		
THIRD:	The date dissolution was authorized: 03/15/10	_		
	Effective date of dissolution if applicable: 03/15/10 (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 dissoluti was sufficient for approval.	on		
	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:	4-144		
	The number of votes cast for dissolution was sufficient for approval by			
	AN 9.			
	(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)			
	MIGNEL A. TOLEDO			
	(Typed or printed name of person signing)			
	PRESIDENT			
	(Title of person signing)			

Filing Fee: \$35