P07000066319

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
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(Bı	isiness Entity Nam	e)
(Document Number)		
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COVER LETTER

TO: Amendment Section		•
Division of Corporations	•	The th
SUBJECT: DISSOLUTION J&B ALLIANCE		
DOCUMENT NUMBER: P07000066319		
The enclosed Articles of Dissolution and	fee are submitted for filir	Called and A
Please return all correspondence concerning	g this matter to the follow	wing:
Sandra Ramirez	*	
(Name of	Contact Person)	
J&B Alliance Inc		
(Fir	m/Company)	
1966 NE 123rd Street. Mail Box # 103		
(A	(ddress)	
North Miami, FL 33181		
(City/Sta	nte and Zip Code)	
For further information concerning this ma	itter, please call:	
Sandra Ramirez	at (<u>786 - 488- 6289</u>	
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amou	int:	
■ \$35 Filing Fee	□ \$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: Amendment Section Division of Corporations	STREET ADDRESS: Amendment Section Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee FL 32314	2661	Executive 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:		
	J&B Alliance, Inc.		
SECOND:	The document number of the corporation (if known): P0700066319		
THIRD:	The date dissolution was authorized: 6 19 2015		
	Effective date of dissolution if applicable: 8 1 3 1 2 0 1 5 (no more than 90 days after dissolution file date)		
	Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.		
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 of 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)		
	Cristian Joffre		
	(Typed or printed name of person signing)		
·	CED		
	(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:__ J&B ALLIANCE INC 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: None Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 1966 NE 123rd Street. Mail Box # 103 North Miami, FL 33181 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. Sandra Ramirez

Printed Name of the Person Filing