907000088514

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone) #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
		•
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



100176321581

diss

04/23/10 -01016--011 **35.00

ZIN APR 23 ME: OF STATE SECRETARY OF STATE

BRIVEW

COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: REMEDIOS PROFESS	SIONAL SERVICES, INC	
DOCUMENT NUMBER: P07000088	514	
The enclosed Articles of Dissolution and fee	e are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
JOSEFA REMEDIOS		
(Name of C	ontact Person)	
REMEDIOS PROFESSIONAL SERVICES, INC		
(Firm/Company)		
8300 SW 27TH STREET		
(Add	dress)	
MIAMI, FL 33155		
(City/State	and Zip Code)	
For further information concerning this matter	er, please call:	
JOSEFA REMEDIOS	at (305) 298-9857	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amoun	::	
✓ \$35 Filing Fee \$\sum \$\\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) \$\$\$ Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS:	STREET ADDRESS:	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee Fl 32314	2661 Evecutive Center Circle	

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

THE PROPERTY OF ARTHURS Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following of dissolution: FIRST: The name of the corporation as currently filed with the Florida Department of State REMEDIOS PROFESSIONAL SERVICES, INC The document number of the corporation (if known):_P07000088514 SECOND: The date dissolution was authorized: 04/01/2010 THIRD: Effective date of dissolution if applicable: 04/01/2010 (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) JOSEFA REMEDIOS (Typed or printed name of person signing) PRESIDENT

Filing Fee: \$35

(Title of person signing)