

P07000090542

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

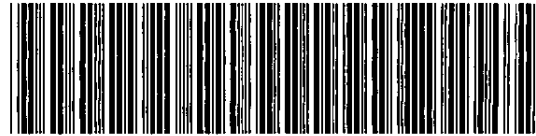
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/04/08--01009--015 **35.00

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2008 JUN -4 PM 2:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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6-6-08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ARTICLE OF DISSOLUTION

DOCUMENT NUMBER: P07000090542

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SYLVESTRE C. YGAY IV

(Name of Contact Person)

INURSES INC

(Firm/Company)

3174 OVERDALE ST

(Address)

DELTONA

FL

32738

(City/State and Zip Code)

For further information concerning this matter, please call:

SYLVESTRE YGAY IV

(Name of Contact Person)

at (407)

302-9553

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$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
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

March 07, 2008

Florida Department of State
Secretary of State
Division of Corporations
P.O. Box 8700
Tallahassee, Florida 32314

Dear Sir/Madam:

Inurses Inc. was formed in order to address the growing manpower shortages of nurses. Recent immigration restrictions has prompted the board members not to pursue any business activity after learning the said promulgation. I regret to inform your good office that Inurses Inc., has ceased any activity just right after its registration.

I am therefore writing you to ask permission from your good office to relieve Inurses Inc., of any liability hereafter. I remain,

Sincerely yours,



SYLVESTRE C. YGAY IV
President, Inurses Inc.

TEL # 407-3029553

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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:

INURSE INC.

SECOND: The document number of the corporation (if known): P07000090542

THIRD: The file date of the articles of incorporation: 08/10/2007

FOURTH: (CHECK AT LEAST ONE BOX)

☒ None of the corporation's shares have been issued.

☐ The corporation has not commenced business.

FIFTH: No debt of the corporation remains unpaid.

SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

☐ A majority of the incorporators authorized the dissolution.

☒ A majority of the directors authorized the dissolution.

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.)

SYLVESTRE YGAY IV

(Typed or printed name of person signing)

PRESIDENT

(Title of Person Signing)

FILED
2008 JUN -6 PM 2:01
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Filing Fee: \$35