

PO7000107715

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

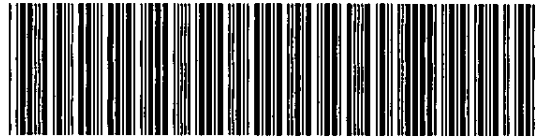
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900137242259

10/27/08--01043--008 **55.00

08 NOV -5 PM 4:56
RECEIVED BY STATE
FALL ABERDEEN, FLORIDA

VLO'S
DRG
11/7



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 30, 2008

IRVIN JOSEPH
19451 PRESIDENTIAL WAY
MIAMI, FL 33179-6407

SUBJECT: NDJ OF SOUTHEAST FLORIDA, INC
Ref. Number: P07000107715

We have received your document for NDJ OF SOUTHEAST FLORIDA, INC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$55.00 payment.

The dissolution form you completed can only be used for limited liability companies.

To file a voluntary dissolution for your corporation, please complete, sign and return the enclosed ARTICLES OF DISSOLUTION form for a Florida profit corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr
Regulatory Specialist II

Letter Number: 108A00055593

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: N.D.J. of Southeast Inc. DBA Wow Smile
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Irvin Joseph

(Name of Person)

(Firm/Company)

19451 Presidential Way

(Address)

Miami, FL 33179-6407

(City/State and Zip Code)

For further information concerning this matter, please call:

Irvin Joseph

(Name of Person)

at (305) 796-9349

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐

\$25.00 Filing Fee

☐

30.00 Filing Fee &
Certificate of Status

☒

\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐

\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
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:

N.D.J. of Southeast Inc.

SECOND: The document number of the corporation (if known): P07000107715

THIRD: The date dissolution was authorized: October 1, 2008

Effective date of dissolution if applicable: October 1, 2008
(no more than 90 days after dissolution file date)

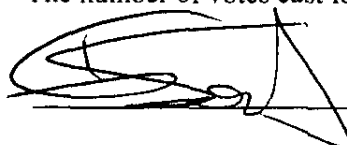
FOURTH: Adoption of Dissolution (CHECK ONE)

☒ 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)

IRVIN JOSEPH

(Typed or printed name of person signing)

Owner / President
(Title of person signing)

Filing Fee: \$35

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 NOV -5 PM 4:56

2008 NOV -5 AM 8:00

RECEIVED