# 207000110469

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
Special Instructions to Filing Officer:				

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### **COVER LETTER**

TO: Amendment Section

Divisi	on of Corpora	ations		
SUBJECT: _	NOTICE	o F	CORPORATE	DISSOLUTION
DOCUMENT	NUMBER: _			
The enclosed a	Articles of Diss	<b>olution</b> and	fee are submitted fo	or filing.
Please return a	all corresponder	ice concerni	ng this matter to the	following:
	AQE	EL M	iRZ <del>X</del>	
		(Name o	f Contact Person)	
	A-1_	EXPRES	S INC.	
		(Fi	rm/Company)	
	1734	N. H	HKBOR CIT	13L VD.
		(	Address)	
	MELE	BOURNE	FL. 32	935
		(City/S	tate and Zip Code)	
For further inf	formation conce	rning this m	natter, please call:	
AQEE	EL MIRZ	<del>/-</del>	at (_321)	549-6419
(Na	ime of Contact I			Code) (Daytime Telephone Number
Enclosed is a	check for the fo	llowing amo	ount:	
¥\$35 Filing I	Fee □ \$43.75   Certifica	Filing Fee & ate of Status		
Amen Divisi P.O. I	ING ADDRESS diment Section ion of Corporati Box 6327 nassee, FL 3231	ons		STREET ADDRESS: Amendment 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:				
	A-1 EXPRESS INC				
SECOND:	The document number of the corporation (if known):	11041	69		
THIRD:	The date dissolution was authorized: 01/29/18				
	Effective date of dissolution if applicable: 01/29/18				
	(no more than 90 days after dissolt Note: If the date inserted in this block does not meet the applicable statutory filing requinot be listed as the document's effective date on the Department of State's records.	irements, this	date will		
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes c was sufficient for approval.	ast for disso	lution		
	☐ Dissolution was approved by the shareholders through voting groups.				
	The following statement must be separately provided for each voting grout to vote separately on the plan to dissolve:	ıp entitled			
	The number of votes cast for dissolution was sufficient for approval by	18 FEB	<u></u>		
	SAMIEER AHMED	1	FILED		
	(voting group)	PH 2: 37			
	Signature: Saman, 1129 18				
	(By a director, president or other officer - if directors or officers have not been selected, an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, that fiduciary)	by hy			
	SAMEER AHMED		<u>.</u>		
	(Typed or printed name of person signing)				
	PRESIDENT				
	(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 re-	equired when filing a voluntary dissolution.
Name of Corporation: A-1 Express Inc	
Date of dissolution will be the date the dissolution is filed with specified in the <i>Articles of Dissolution</i> .	the Department of State or as
Description of information that must be included in a claim:	
Mailing address where claims can be sent: (Claims cannot be se	ent to the Division of Corporations)
1860 Canopy Drive	
Melbourne FL 32935	
A claim against the above named corporation will be barred un within 4 years after the filing of this notice.	less a proceeding to enforce the claim is commenced
Sameer Ahmed	Janfuel 31/29/18
Printed Name of the Person Filing	Signature of the Person Filing