

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: THE ELITE CARRIER SERVICES OF MIAMT LLC

Account Number: I20120000040

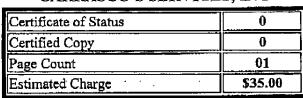
Phone Fax Number : (305)405-2600

R. WHITE

AUG -7 2013

: (305)405-2601

DISSOLUTION OR WITHDRAWAL CARRASCO'S SERVICES, INC



Electronic Filing Menu

Corporate Filing Menu

Help

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

COVER LETTER

Division of Corporations
SUBJECT: CARRASCO'S SERVICES, INC
DOCUMENT NUMBER: P08000046502
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ZOELYN IGLESIAS
(Name of Contact Person)
THE ELITE CARRIER SERVICES OF MIAMI LLC
(Firm/Company)
11790 NW S RIVER DR
(Address)
MEDLEY, FL 33178
(City/State and Zip Code)
For further information concerning this matter, please call:
ZOELYN IGLESIAS (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations STREET ADDRESS: Amendment Section Division of Corporations

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FAX No. 3054052601

FAX No. 8054052601

3.302

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: CARRASCO'S SERVICES, INC		
SECOND:	The document number of the corporation (If known): P08000046502		
THIRD:	The date dissolution was authorized: 08/05/2013		
	Effective date of dissolution if applicable: 08/05/2013		
FOURTH:	(no more than 90 days after dissolution file date) Adoption of Dissolution (CHECK ONE)		
•	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.	n	
	Dissolution was approved by the shareholders through voting groups.	澎	
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:	şi AUG	-m
	The number of votes cast for dissolution was sufficient for approval by	3 -6 PH	
	(volving group)	4: 06	,
S	(By a director, president or other brincer - If directors or officers have not been selected, by an incorporation of in the lands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)		
<u> </u>	MARIO E CARRASCO		
	(Typed or printed name of person signing)	,	
ļ	PRESIDENT		
~	(Title of person signing)		

Filing Fee: \$35

against this corporation as provided in s. 607.1407, F.S.

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation:

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:

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

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.

Printed Name of the Person Filing

Signature of the Person Filing