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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

SUBJECT: Remote Interpreting, Inc.	
DOCUMENT NUMBER: P08000	0097441
The enclosed Articles of Dissoluti	on and fee are submitted for filing.
Please return all correspondence co	oncerning this matter to the following:
Rodrigo de la Mora	
(1)	Name of Contact Person)
FIIT	
	(Firm/Company)
2431 Aloma avenue suite 327	
	(Address)
Winter Park, Florida 32792	
	City/State and Zip Code)
For further information concerning	this matter, please call:
Rodrigo de la Mora	at (4076719556
(Name of Contact Person	n) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following	ng amount:
□ \$35 Filing Fee ■ \$43.75 Filing Certificate of	Fee & Status Status Certified Copy (Additional copy is enclosed) Status Certified Copy (Additional copy is enclosed) Status Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

16 APR - 8 TARY OF STATE OR DESIDA

FIRST:	SECRE IAR SEE, FLORIUM The name of the corporation as currently filed with the Florida Department of State:
inst.	Remote Interpreting, Inc.
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized: Dec 31, 2015
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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)
S	Gignature: (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)
	Agustín S. de la Mora
•	(Typed or printed name of person signing)
	CEO
•	(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 required when filing a voluntary dissolution.

Name of Corporation:

Remote Interpreting, Inc.

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:

Date of service, location of service, contact information, Remote Interpreting employee authorizing the service,

Reason for delay in filing of claim, amount claimed, contact information of claimant, original documentation proving the date of service specified

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

RI claims C/O FIIT 2431 Aloma avenue suite 327 Winter Park, FL 32792

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.

Agustín S. de la Mora

Printed Name of the Person Filing

Signature of the Person Filing