

PD8000097953

(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 MAR - 2 PM 4:21

C.L.
3-4-15

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DITMARA TAMAYO INC

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

ANDREW SIEGERMAN

(Name of Contact Person)

DITMARA TAMAYO CORPORATION

(Firm/Company)

3016 S OAKLAND FOREST DRIVE APT 204

(Address)

OAKLAND PARK, FL 33309

(City/State and Zip Code)

For further information concerning this matter, please call:

ANDREW SIEGERMAN

(Name of Contact Person)

at 954-796-4050

(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

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:

DITMARA TAMAYO CORPORATION

SECOND: The document number of the corporation (if known): P08 000097953

THIRD: The date dissolution was authorized: 12/31/2014

Effective date of dissolution if applicable: 12/31/2014
(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)

X Signature: Ditmar B. Tamayo
(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)

DITMARA TAMAYO

(Typed or printed name of person signing)

PRES

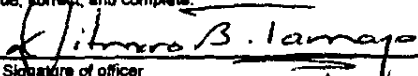
(Title of person signing)


Filing Fee: \$35

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Corporate Dissolution or Liquidation
(Required under section 6043(a) of the Internal Revenue Code)

OMB No. 1545-0041

Please type or print	Name of corporation DITMARA TAMAYO CORPORATION			Employer identification number 26-3615467	
	Number, street, and room or suite no. (If a P.O. box number, see instructions.) 3016 S OAKLAND FOREST DRIVE APT 204			Check type of return <input type="checkbox"/> 1120 <input type="checkbox"/> 1120-L <input type="checkbox"/> 1120-IC-DISC <input checked="" type="checkbox"/> 1120S <input type="checkbox"/> Other ▶	
	City or town, state, and ZIP code OAKLAND PARK, FL 33309				
1 Date incorporated 10/31/2008		2 Place incorporated FLORIDA		3 Type of liquidation <input checked="" type="checkbox"/> Complete <input type="checkbox"/> Partial	
5 Service Center where corporation filed its immediately preceding tax return CINCINNATI		6 Last month, day, and year of immediately preceding tax year 12/31/2013		7a Last month, day, and year of final tax year 12/31/2014	
7c Name of common parent N/A		7d Employer identification number of common parent N/A		7b Was corporation's final tax return filed as part of a consolidated income tax return? If "Yes," complete 7c, 7d, and 7e. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
				7e Service Center where consolidated return was filed CINCINNATI	
8 Total number of shares outstanding at time of adoption of plan of liquidation				Common 100	
9 Date(s) of any amendments to plan of dissolution				N/A	
10 Section of the Code under which the corporation is to be dissolved or liquidated				331	
11 If this form concerns an amendment or supplement to a resolution or plan, enter the date the previous Form 966 was filed				N/A	
<p align="center">Attach a certified copy of the resolution or plan and all amendments or supplements not previously filed.</p> <p><small>Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.</small></p>					
 Signature of officer			PRES Title		1/22/2015 Date


 Department of the Treasury
 Internal Revenue Service Center
 Cincinnati, OH 45999-0013