## Po9000015385

(Requestor's Name)
(Address)
(Address)
(1212)
(6) 1014 17: (7)
(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



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diss with

02/04/10--01028--024 \*\*43.75

2010 FEB -4 PH 12: 30
SECRETARY OF STATE
AHASSEE, FLORID

ASR 2/5/10

## COVER LETTER

TO: Amendment Section Division of Corporations	<b>*</b>
SUBJECT: DISSOLUTION OF COM	npany. Restaurant Closed
DOCUMENT NUMBER: POGOOC	)15385
The enclosed Articles of Dissolution and fee are sub	mitted for filing.
Please return all correspondence concerning this matt	er to the following:
RAUL AVAREZ R	UZ
(Name of Contact Po	erson)
BAYFOGONA - TO (Firm/Compan	re Heights.
(Firm/Compan	y)
4014 WALVAST.	
(Address)	
TAMPA, PL 3360	<del>4</del>
(City/State and Zip	
For further information concerning this matter, please	e call:
Raul. Alvarez Ruiz at ( (Name of Contact Person)	813 ) 451-7218 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certificate	5 Filing Fee & \$\sum \\$52.50 Filing Fee, ed Copy
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

2010 FEB - 4 PH 12: 31

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the applications of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	Bay Fagora Restaurant, Inc
SECOND:	The document number of the corporation (if known): POODD 15385
THIRD:	The file date of the articles of incorporation: 10 H 209
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Sign	nature: X  (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.)
	KAUAWAREZRUIZ
	(Typed or printed name of person signing)
	President Owner (Title of Person Signing)
	(time or reason 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: Bay Fogona Restaurant 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:
The restaurant never made money
no customers, we were robbed, and
have no other income to continue open
Business is closed. Lease has been terminated
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
494 W ALVA ST.
TAMOA FL 33614.
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.
X RAUL AWAREZRUIZ X
Printed Name of the Person Filing Signature of the Person Filips

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00