P09000028083

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
· (Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

Division of Corporations				
SUBJECT: DISSOCUTION OF WES.				
DOCUMENT NUMBER: P0900028083				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
NIRTIA GINEZ (Name of Contact Person)				
N V 6 · (Firm/Company)				
2274 SW OLYMPIC CLUB TERRACE (Address)				
PALTI CITY EL 34990 (City/State and Zip Code)				
For further information concerning this matter, please call:				
NIPTA-6 INEZ at (7+2) 6269286 (Name of Contact Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) Certificate of Status & Certified Copy (Additional copy is enclosed)				
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:			
	NY 6 CORP			
SECOND:	The document number of the corporation (if known): PO 90000	28083		
THIRD:	The date dissolution was authorized: $3/27/2009$			
	Effective date of dissolution if applicable: (no more than 90 days after dissolution)	n file date)		
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes case was sufficient for approval.	t for dissolution		
	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 dast for dissolution was sufficient for approval by	5 7		
	(voting group)	MID: 09		
	Signature: (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)			
	NIRMA 7 6 IN EZ (Typed or printed name of person signing)			
	(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: Ny 6 wep 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: DISSOLUTION OF THE CORP. OUT OF BUSSINESS Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 2274 SW OWNPIC CWBT PALM CITY, FL 34990 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.

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