

P09000048833

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

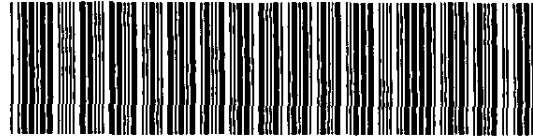
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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07/01/13--01019--022 **35.00

FILED
13 AUG -5 PM 4 17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Voldas.
w/Notice
8/6/13
DC



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 9, 2013

ALVAREZ ARACELIS
A2GRAFX INC
12221 SW 7TH STREET
PEMBROKE PINES, FL 33025

SUBJECT: A2GRAFX INC
Ref. Number: P09000048833

RECEIVED
13 AUG -5 AM 8:01
FLO
DIVISION OF CORPORATIONS

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

THE NOTICE OF DISSOLUTION SHOULD BE SIGNED BY AN OFFICER OR DIRECTOR.

You have submitted two documents to dissolve the subject corporation. Please choose the correct type of dissolution according to Florida Statutes and resubmit only one document.

If the dissolution was approved by the shareholders and if voting by voting groups was required, a statement that the number cast for dissolution was sufficient for approval must be separately provided for each voting group entitled to vote separately on the dissolution. The name(s) of each voting group(s) should be indicated.

The document must state the date the dissolution was authorized.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell
Regulatory Specialist II

Letter Number: 913A00016678

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: A2GRAFX Inc.

DOCUMENT NUMBER: P09000048833

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

Please return all correspondence concerning this matter to the following:

Alvarez Aracelis.
(Name of Contact Person)

A2GRAFX Inc.
(Firm/Company)

1156 SW 10th Ave. ^{Change of Address} 12221 SW 7th ST
(Address)

Pembroke Pines, FL 33025
(City/State and Zip Code)

For further information concerning this matter, please call:

Alvarez Aracelis at (347) 255-4205
(Name of Contact Person) (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
Tifton Building
Executive Center Circle
FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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:

A2GRAFX Inc.

SECOND: The document number of the corporation (if known): 89000048833

THIRD: The file date of the articles of incorporation: 06/01/2009

FOURTH: (CHECK AT LEAST ONE BOX)

☒ None of the corporation's shares have been issued.

☐ The corporation has not commenced business.

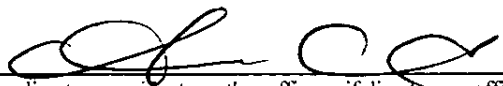
FIFTH: No debt of the corporation remains unpaid.

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.

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.)

Aracelis Alvarez

(Typed or printed name of person signing)

President

(Title of Person Signing)

FILED
13 AUG -5 PM 4:17
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Filing Fee: \$35

01/

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: A2GRAFX 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:

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

~~1156 SW 10th Ave.~~ ^{New address} 12221 SW 7th St
Dembroke Pines, FL 33025

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.

Aracelis Alvarez
Printed Name of the Person Filing

[Signature]
Signature of the Person Filing

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