P090000003980

- (Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Dx	ocument Number)	
Certified Copies	_ Certificates	s of Status
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11/28/17--01018--023 **35.00

2017 HOV 27 PN R: L4

EFFECTIVE DATE

12/3/17

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COVER LETTER

TO: Amendment Section

Division of Corporations RIO HONDO CORP SUBJECT: P09000063980 DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LUIS F ROSALES (Name of Contact Person) EXECUTIVE TAX SERVICE INC (Firm/Company) 5931 NW 173 DRIVE #9 (Address) MIAMI, FL 33015 (City/State and Zip Code) For further information concerning this matter, please call: LUIS F ROSALES (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: ■ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee. Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

EFFECTIVE DATE 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:
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized:
	Effective date of dissolution if applicable: 12/31/2017 (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 east for dissolution was sufficient for approval by
	7. SE 1. A.L.
	(voting group)
	Signature: (By a director, provident 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)
	MARIANA GUERRIERI
	(Typed or printed name of person signing)
	DIRECTOR
	(Title of person signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the against this corporation as prov			olution of payment of unknown claims
This "Notice of Corporate Dis.	solution" is optional and	is not required wh	en filing a voluntary dissolution.
Name of Corporation: RIO HO	NDO CORP		
Date of dissolution will be the specified in the <i>Articles of Dis</i> .		ed with the Depart	ment of State or as
Description of information that	t must be included in a cl	aim;	
NATURE OF CL	AIM AMOUNT	ALONG U	HTIC
NAME ADDRE	ESS AND TO	ECE PHUNE	NUMBER
Mailing address where claims	can be sent: (Claims cam	not be sent to the D	Division of Corporations)
5931 NW 173 DR STE 9			
MIAMI FL. 33015			
			
A claim against the above nam within 4 years after the filing of		irred unless a proce	eeding to enforce the claim is commence
			$\rho \leq \gamma_{\alpha}$
Mariana Guerrieri	23 6 000		
Printed Name (of the Person Filling		Signature of the Person/Filfing