

P090000 66458

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

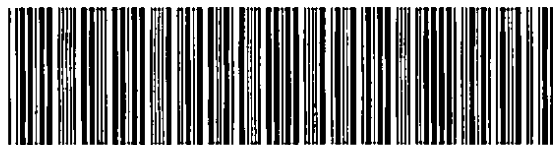
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

EFFECTIVE DATE

2/31

Office Use Only



300326503993

03/26/19--01022--008 \*\*43.75

FILED  
MAR 26 PM 5:45  
TALLAHASSEE, FLORIDA

APR 05 2019  
S. YOUNG

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** APEX ESTATES, INC.  
\_\_\_\_\_

**DOCUMENT NUMBER:** P09000066458  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Renaldy J. Gutierrez  
\_\_\_\_\_

(Name of Contact Person)

Gutierrez & Associates  
\_\_\_\_\_

(Firm/Company)

1200 Brickell Ave. Suite 350  
\_\_\_\_\_

(Address)

Miami, FL 33131  
\_\_\_\_\_

(City/State and Zip Code)

For further information concerning this matter, please call:

Renaldy J. Gutierrez  
\_\_\_\_\_

(Name of Contact Person)

at ( 305-577-4500

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |  |  |   |
|--|--|--|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>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**

**OF**

**APEX ESTATES, INC.**

Pursuant to Section 607.1403, Florida Statutes, we, the undersigned, hereby execute, acknowledge and file the following Articles of Dissolution for the purpose of recording the dissolution of APEX ESTATES, INC., a Florida corporation for profit organized under the laws of the State of Florida, to wit:

**ARTICLE I - Name and Incorporation**

The name of the corporation is APEX ESTATES, INC. (the "Corporation"), that was incorporated under Articles of Incorporation filed with the Florida Department of State on August 5, 2009 and assigned document number P09000066458.

**ARTICLE II-Resolutions of the Shareholders**

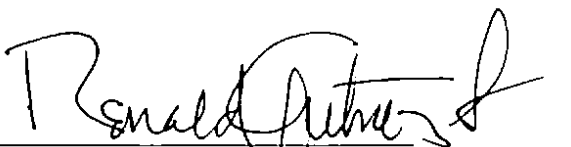
All of the Shareholders and all of the Directors of the Corporation, by a unanimous written consent dated March 21, 2019, decided to authorize the dissolution of the Corporation.

The effective date of the dissolution of the Corporation shall be as of March 31<sup>st</sup>, 2019.

**ARTICLES III-Shareholders Vote.**

The number of shareholders votes cast for dissolution was sufficient for approval.

IN WITNESS WHEREOF, the undersigned Assistant Secretary of the Corporation, hereby executes these Articles of Dissolution on this 22<sup>nd</sup> day of MARCH, 2019.

By:   
Renaldy J. Gutierrez  
Assistant Secretary

FILED  
19 MAR 26 PM 5:45  
TALLAHASSEE, FLORIDA

### **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:            APEX ESTATES, 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:

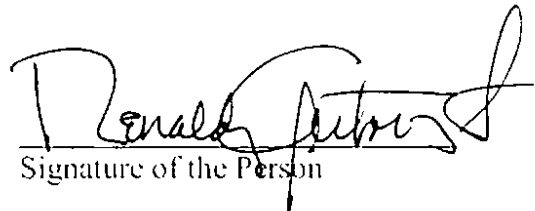
\_\_\_\_\_ Copy of document or instrument \_\_\_\_\_  
\_\_\_\_\_ Statement of Account \_\_\_\_\_  
\_\_\_\_\_ Type of claim, date \_\_\_\_\_

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

\_\_\_\_\_ c/o Gutierrez & Associates \_\_\_\_\_  
\_\_\_\_\_ 1200 Brickell Avenue, Suite 350 \_\_\_\_\_  
\_\_\_\_\_ Miami, Florida 33131 \_\_\_\_\_

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.

\_\_\_\_\_ Renaldy J. Gutierrez \_\_\_\_\_  
Printed Name of the Person Filing

\_\_\_\_\_  \_\_\_\_\_  
Signature of the Person