## P09000079040

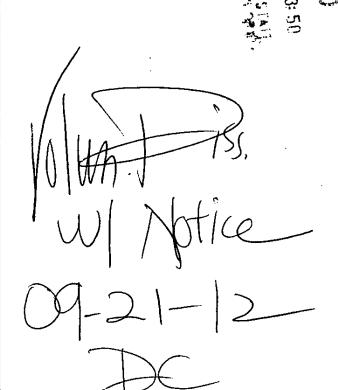
(Re	equestor's Name	)
(Ad	dress)	
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(Cit	y/State/Zip/Pho	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	ame)
(Document Number)		
Certified Copies	Certificate	es of Status
Special Instructions to	Filing Officer:	
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09/17/12--01012--028 \*\*35.00



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: DISSOLUTION OF ARTICLES OF CORPORATION
DOCUMENT NUMBER: P09000079040
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
IRENE I. FELIPE
(Name of Contact Person)
IREENS CORP
(Firm/Company)
7331 GARY AVE. # 103
(Address)
MIAMI, FLORIDA 33141
(City/State and Zip Code)
For further information concerning this matter, please call:
IRENE I. FELIPE at ( 786- ) 515-8956
(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 & Certified Copy (Additional copy is enclosed) (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 IREEN'S CORPORATION	f State:			
SECOND:	The document number of the corporation (if known): P09000079040				
THIRD:	The date dissolution was authorized: 06/01/2011  Effective date of dissolution if applicable: 06/01/2011  (no more than 90 days after dissolution	file date			
FOURTH:	Adoption of Dissolution (CHECK ONE)  Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.  Dissolution was approved by the shareholders through voting groups.  The following statement must be separately provided for each voting group e to vote separately on the plan to dissolve:  The number of votes cast for dissolution was sufficient for approval by  (voting group)  (voting group)  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)				
	IRENE I. FELIPE  (Typed or printed name of person signing)				
	PRESIDENT (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

gainst 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: IREEN'S CORPORATION
Date of dissolution will be the date the dissolution is filed with the Department of State or as pecified in the Articles of Dissolution.
Description of information that must be included in a claim:
THE COMPANY HAS BEEN INACTIVE SINCE JUNE 2011. THEREFORE
HAVE DISSOLUTION THE CORP.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
7331 GARY AVE. # 103
MIAMI BEACH, FLORIDA 33141
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commence within 4 years after the filing of this notice.
IRENE L FELIPE

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

Printed Name of the Person Filing