

P09000086209

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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1.11.13

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of LEOPOLD FM ENTERPRISES INCORPORATED

DOCUMENT NUMBER: P09000086209

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

Please return all correspondence concerning this matter to the following:

Fred Leopold

(Name of Contact Person)

LEOPOLD FM ENTERPRISES INC

(Firm/Company)

19553 NW 2nd Av

(Address)

Miami Gardens, FL 33169

(City/State and Zip Code)

For further information concerning this matter, please call:

Fred Leopold

(Name of Contact Person)

at (954) 2432001

(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
Clifton Building
2661 Executive Center Circle
Tallahassee, 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:

LEOPOLD FM ENTERPRISES INC

SECOND: The document number of the corporation (if known): **P09000086209**

THIRD: The file date of the articles of incorporation: **October 19, 2009**

FOURTH: (CHECK AT LEAST ONE BOX)

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

☐ The corporation has not commenced business.

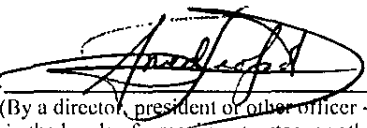
FIFTH: No debt of the corporation remains unpaid.

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.)

FRED LEOPOLD

(Typed or printed name of person signing)

PRESIDENT

(Title of Person Signing)

13 JAN -9 AM 8:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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: LEOPOLD FM ENTERPRISES 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:

I get divorce with my wife who was one of the most important partners in the business.

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

19553 NW 2nd Ave Miami Gardens FL 33169

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.

FRED LEOPOLD

Printed Name of the Person Filing


Signature of the Person Filing

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