

P/0000002231

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies

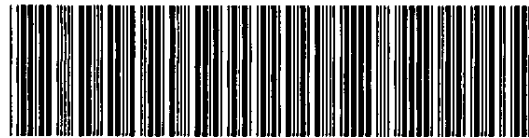


Certificates of Status



Special Instructions to Filing Officer:

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13 OCT 15 PM 5:00

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 25, 2013

SEOKYU KIN, CPA
7535 LITTLE RIPER TURNPIKE
UNIT 310-B
ANNANDALE, VA 22003

2ND ML

SUBJECT: OBT SPA, INC.
Ref. Number: P10000002231

We have received your document for OBT SPA, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

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.

Teresa Brown
Regulatory Specialist II

Letter Number: 113A00022588

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: OBT SPA INC.

DOCUMENT NUMBER: P10000002231

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

Please return all correspondence concerning this matter to the following:

Paul Ko

(Name of Contact Person)

OBT SPA INC

(Firm/Company)

13743 SW 90TH AVE, APT R208

(Address)

MIAMI, FL 33176

(City/State and Zip Code)

For further information concerning this matter, please call:

PAUL KO

(Name of Contact Person)

at (703) 914-0085

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 26, 2013

PAUL KO
OBT SPA, INC.
13743 SW 90TH AVE APT R208
MIAMI, FL 33176

SUBJECT: OBT SPA, INC.
Ref. Number: P10000002231

We have received your document for OBT SPA, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the date the dissolution was authorized.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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.

Teresa Brown
Regulatory Specialist II

Letter Number: 913A00020247

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 State:

OBT SPA INC

SECOND: The document number of the corporation (if known): **P10000002231**

THIRD: The date dissolution was authorized: **7/31/2013**

Effective date of dissolution if applicable: **07/31/2013**

(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 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 cast for dissolution was sufficient for approval by

(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)

Paul Ko

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35

FILED
13 OCT 15 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA