# P10000015995

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: DISSOLVE A FLORIDA PROFIT CORPORATION
DOCUMENT NUMBER: P10000015995
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MOHAMMAD G. FAISAL
(Name of Contact Person)
MIAMI SOLAR, INC.
(Firm/Company)
1502 CARAFE CT
(Address)
PALM BEACH GARDENS, FL 33410
(City/State and Zip Code)
For further information concerning this matter, please call:
MOHAMMAD G. FAISAL at ( 561 ) 866-7518
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee    Certificate of Status    Certified Copy
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

## FILED

## ARTICLES OF DISSOLUTION 2010 MAY 21 PM 12: 18

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:	
	MIAMI SOLAR, INC.	
SECOND:	The document number of the corporation (if known): P10000015995	
THIRD:	The file date of the articles of incorporation: 02/22/2010	
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.)		
MOHAMMAD G. FAISAL		
(Typed or printed name of person signing)		
PRESIDENT		
(Title of Person Signing)		

Filing Fee: \$35

### **Notice of Corporate Dissolution**

	itted by the dissolved corporation named below for resolution of payment of unknown claims tion 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 Corporat	on:	
	will be the date the dissolution is filed with the Department of State or as icles of Dissolution.	
Description of inf	rmation that must be included in a claim:	
NO CLAIM	3	
Mailing address w	ere claims can be sent: (Claims cannot be sent to the Division of Corporations)	
1	502 CARAFE CT.	
<u></u>	ALM BEACH GARDENS, FL 33410	
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	above named corporation will be barred unless a proceeding to enforce the claim is commenced the filing of this notice.	
MOI	AMMAD G. FAISAL M) W	
	rinted Name of the Person Filing Signature of the Person Filing	