

P10000039750

(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:

Office Use Only



900226182939

03/26/12--01033--033 **35.00

03/26/12--01033--034 **8.75

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FILED
12 SEP 19 AM 11:19
SEATTLE, WA
FBI

SEP 21 2012

T. ROBERTS

**FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS**

Amendment Section
Division of Corporations
PO BOX 6327
Tallahassee, FL 32314

September 10th, 2012

REF : INFEREX DORPORATE DISSOLUTION – P10000039750

Dear Sir/Madam :

In reference to this company, I sent on March 21st, 2012 the Articles of Dissolution properly filled and a check for the Dissolution of \$35.00 and a check for the Certificate of Status of \$8.75 and even though they were cashed (see copy of bank statement and checks attached) the Dissolution confirmation and Certificate of Status was never sent to me.

Recently I received a letter from your office warning me that the Corporation Renewal was never sent in May and informing me of penalties and/or cancelation of the corporation. That is when I realized I had never received the papers for the Dissolution...

I'm urged to normalize this situation with Tallahassee as well as with the City of Weston, with which I have not been able to present the Dissolution papers.

Expecting a quick action and reply on this matter.

Thank you

Alejandro Tomadin
For INFEREX CORP.

RECEIVED

12 SEP 13 AM 9:33

FLORIDA
DIVISION OF
CORPORATIONS
TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: INFEREX CORP. DISSOLUTION

DOCUMENT NUMBER: P10000039750

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

Please return all correspondence concerning this matter to the following:

ALEJANDRO TOMADIN

(Name of Contact Person)

INFEREX CORP.

(Firm/Company)

304 INDIAN TRACE, SUITE 816

(Address)

WESTON FL 33326

(City/State and Zip Code)

For further information concerning this matter, please call:

ALEJANDRO TOMADIN

(Name of Contact Person)

at (954) 3898651

(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

FILED
12 SEP 18 AM 11:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

INFEREX CORP.

SECOND: The document number of the corporation (if known): P10000039750

THIRD: The file date of the articles of incorporation: 08/20/2010

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.)

ALEJANDRO TOMADIN

(Typed or printed name of person signing)

DIRECTOR - VICE-PRESIDENT

(Title of Person Signing)

Filing Fee: \$35

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:

INFEREX CORP.

SECOND: The document number of the corporation (if known): P10000039750

THIRD: The date dissolution was authorized: DECEMBER 27th, 2011

Effective date of dissolution if applicable: December 31, 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 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

Directors

(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)

ALEJANDRO TOMADIN

(Typed or printed name of person signing)

DIRECTOR - VICE-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 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: INFEREX CORP.

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:

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

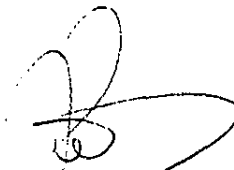
304 INDIAN TRACE, SUITE 816

WESTON FL 33326

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.

ALEJANDRO TOMASIN

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