

P10000082261

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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13 APR 25 PM 12:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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MAY 02 2013

R. WHITE

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GIBI REAL ESTATE, CORP.

DOCUMENT NUMBER: P10000082261

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

Please return all correspondence concerning this matter to the following:

Antonio L. Roca, Esq.

(Name of Contact Person)

ROCA GONZALEZ, PA

(Firm/Company)

2601 S. Bayshore Drive, Suite 725

(Address)

Miami, FL 33133

(City/State and Zip Code)

For further information concerning this matter, please call:

Carolyn Kahl

(Name of Contact Person)

at (305) 859-6050

(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 607.1403, 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:
GIBI REAL ESTATE, CORP.

SECOND: The document number of the corporation (if known): **P10000082261**

THIRD: The date dissolution was authorized: **April 22, 2013**

Effective date of dissolution if applicable:

(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

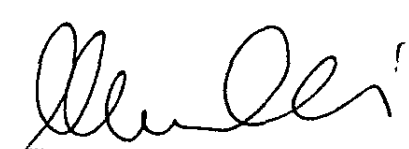
☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ 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)

MASSIMO MINARELLI

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

FILED
13 APR 25 PM 12:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: GIBI REAL ESTATE, 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:

- 1) Name and mailing address of person/entity making the claim
- 2) Description of the nature of the claim and events giving rise to the claim
- 3) Statement of the amount of the claim
- 4) Any other information relevant to the claim

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

GIBI REAL ESTATE, CORP.

ROCA GONZALEZ, PA

2601 S. Bayshore Drive, Suite 725

MIAMI, FLORIDA 33133

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

MASSIMO MINARELLI

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

COUNTRY OF _____)
) SS:
PROVINCE OF _____)

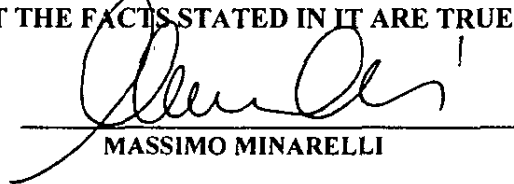
1. Affiant hereby certifies that ☒ Affiant has no knowledge of any creditors of the Corporation or ☐ Affiant is aware that the following persons or entities are known creditors of the Corporation:

3. Affiant hereby certifies that ☒ the Corporation has no pending or threatened litigation or ☐ Affiant is aware that the following litigation is pending or threatened against the Corporation:

4. Affiant hereby certifies that ☒ no judgment or decree has been entered in any court of this State or of the United States against the Corporation and remains unsatisfied or ☐ Affiant is aware that the following judgments or decrees have been entered against the Corporation and remain unsatisfied:

5. Affiant further states that he is familiar with the nature of an oath; and with the penalties provided by the laws of the State of Florida for falsely swearing to statements made in an instrument of this nature.
6. Affiant further certifies that he has read, or has had read to him, the full facts of this Affidavit, understands its contents and attests to the same based on his own personal knowledge.

UNDER PENALTY OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING AFFIDAVIT AND THAT THE FACTS STATED IN IT ARE TRUE.



MASSIMO MINARELLI