P10000085458

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(C	ity/State/Zip/Phone	(#)
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SECKETARY OF STATE OIVISION OF CORPORATIONS

COVER KETTER

Division of Corporations
SUBJECT: Dissolution
DOCUMENT NUMBER: P10000085458
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Hilda Marquez (Name of Contact Person)
Marquez Landscape Corporation (Firm/Company)
(Firm/Company)
15455 SW 80 st. (apt 105)
(ridaess)
Miami FL 33193
(City/State and Zip Code)
For further information concerning this matter, please call:
Hilda Marquez at (786) 999 - 2847 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S35 Filing Fee \$\ \$43.75 Filing Fee & \text{\$\ \ext{\$\ \text{\$\ \exitt{\$\ \text{\$\ \exitt{\$\ \text{\$\ \exitt{\$\ \
MAILING ADDRESS: STREET ADDRESS:
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 15, 2011

HILDA MARQUEZ MARQUEZ LANDSCAPE CORPORATION 15455 SW 80 ST. (APT. 105) MIAMI, FL 33193

SUBJECT: MARQUEZ LANDSCAPE CORPORATION

Ref. Number: P10000085458

We have received your document for MARQUEZ LANDSCAPE CORPORATION and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE CHECK ONLY 1(ONE) BOX IN THE 7TH(SEVENTH) PART OF THE FORM.

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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 211A00025785



COVER LETTER

Division of Corporations	
SUBJECT: Dissolution	
DOCUMENT NUMBER: P1000085458	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Hilda Manguez. (Name of Contact Person)	· · · · · · · · · · · · · · · · · · ·
MARQUEZ LANDSCAPE CONPORTA (Firm/Company) 15455 SW 80Th STRET APT 10 (Address)	TiON
15455 SW 80Th STNET APT 10 (Address)	5
MIAMI, Fl 33193 (City/State and Zip Code)	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Contact Person) at (786) 999 - (Area Code & Daytime Tele	2847 ephone Number)
Enclosed is a check for the following amount:	
S35 Filing Fee \$\sum \$\\$43.75 \text{ Filing Fee & }\sum \$\\$43.75 \text{ Filing Fee & }\sum \$\\$52.50 \text{ Filing Fee & }\sum \$\\$Certificate \text{ Opy } \text{ Certified Copy }\text{ Certified Copy is enclosed)} \text{ (Additional enclosed)}	of Status & Copy Il copy is
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRES Amendment Section Division of Corpor Clifton Building 2661 Executive Ce	n rations

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:	
	Manguez LANScape Conporation	
SECOND:	The document number of the corporation (if known): P1000085458	
THIRD:	The file date of the articles of incorporation: $\frac{10/18/20/0}{2}$	011
FOURTH:	The file date of the articles of incorporation: 10/18/20/0 (CHECK AT LEAST ONE BOX)	,
	LACINORE OF THE COMBONION SIDNES DAVE DECILISATED.	
	The corporation has not commenced business.	ر ب
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.	
Sign	ature: (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.)	
	(Typed or printed name of person signing)	
	(Title of Person Signing)	

Filing Fee: \$35