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## **COVER LETTER**

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations	
SUBJECT: CORP DISSOLU	TION
DOCUMENT NUMBER: P110000	039440
The enclosed Articles of Dissolution and fe	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
ELANY E FALQUEZ	
•	Contact Person)
MY DELISH CATERING	S, INC
(Firm	/Company)
1857 SALERNO CIRC	
(Ad	dress)
WESTON, FL 33327	
(City/State	e and Zip Code)
For further information concerning this matt	er, please call:
ELANY E FALQUEZ	at (954) 235.7278
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amour	nt:
■ \$35 Filing Fee	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

1	ARTICLES OF DISSOLUTION FILED
Pursuant to s of dissolutio	section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles on:
FIRST:	The name of the corporation as currently filed with the Florida Department of State:  MY DELISH CATERING, INC
SECOND:	The document number of the corporation (if known): P11000039440
THIRD:	The date dissolution was authorized: $\frac{03/11/2014}{1}$
	Effective date of dissolution <u>if applicable:</u> 03/11/2014  (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)
	ELANY E FALQUEZ (Typed or printed name of person signing)
	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: MY DELISH CATERING, INC
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
VOLUNTARY DISSOLUTION
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
1857 SALERNO CIRC
WESTON, FL 33327
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.

Printed Name of the Person Filing

**ELANY E FALQUEZ** 

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00