P11000049649

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

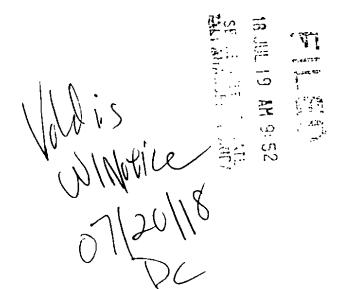
Office Use Only



000315241500

07/24/18--01018--002 **10.00

07/02/18--01033--007 **25.00





July 9, 2018

'n

STEVEN B. MRHA SBM ADVISORY CORP 2950 NE 188TH STREET, UNIT 524 AVENTURA, FL 33180

SUBJECT: SBM ADVISORY CORP Ref. Number: P11000049649

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$10.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

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) 245-6050.

Darlene Connell
Regulatory Specialist II Supervisor

RECEIVED

18 JUL 19 FM12: 30
SECRETARY JELLAHASSEF TELE

Letter Number: 618A00014035

COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: Dissolution of 38M A	duisary Corp / Pay	ment Balinie owed
DOCUMENT NUMBER: 45-24167)7 / P1100004	9649
The enclosed Articles of Dissolution and f	ee are submitted for filin	g.
Please return all correspondence concerning	g this matter to the follow	ving:
Steven 3. Mrha (Name of	Contact Person)	
SBW Haniter Carb		
2950 NE 188 St. Un. + 524	ddress)	
Aventura FL 33180 (City/Sta	ite and Zip Code)	
For further information concerning this ma		
Steven 13 Mrhc	at (954-560	-8392
Steven 13 Mrha (Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amou	int:	
Certificate of Status 10 Balance and	S43.75 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	Ame Divi Clift	EET ADDRESS: ndment Section sion of Corporations on Building 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 Departme	ent of State:
	SBM Adv: suy (w?	
SECOND:	The document number of the corporation (if known): 45-2410777	1911000049649
THIRD:	The date dissolution was authorized:	<u></u>
	Effective date of dissolution <u>if applicable</u> : (no more than 90 days after dissolution <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing request to be listed as the document's effective date on the Department of State's records.	lution file date) uirements, this date will
FOURTH:	Adoption of Dissolution (CHECK ONE)	
	Dissolution was approved by the shareholders. The number of votes was sufficient for approval.	cast for dissolution
	☐ Dissolution was approved by the shareholders through voting groups	
	The following statement must be separately provided for each voting gro to vote separately on the plan to dissolve:	up entitled
	The number of votes cast for dissolution was sufficient for approval by	18 JUL 81
	(voting group)	9
	Signature:	AH 9: 52
	By a director, president or other officer - if directors or officers have not been selected an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary that fiduciary)	, by ·, by
	Steven 3. Make (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: S&M Advisory Corp
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:
Company no longer active
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Steven B. Mrha - Prosicion
2950 N.E. 1881 St. Unit 524
Aventura, FL 33180
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.
Steven B. Mrha Printed Name of the Person Filing Signature of the Person Piling
Printed Name of the Person Filing Signature of the Person Piling