

From:

09/22/2016 13:52

#667 P.001/003

Division of Corporations

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**P110000 35682**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : NATIONAL CORPORATE RESEARCH, LTD.  
Account Number : 120000000088  
Phone : (800) 221-0102  
Fax Number : (800) 944-6607

**DISSOLUTION OR WITHDRAWAL  
ECONOMIC SELF-SUFFICIENCY CENTER OF PERRINE,  
INC.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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16 SEP 22 AM 2:26

2016 SEP 22 AM 10:33  
STATE OF FLORIDA  
DIVISION OF CORPORATIONS

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## 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:

Economic Self-Sufficiency Center of Perrine, Inc.

SECOND: The document number of the corporation (if known): P11000085682

THIRD: The date dissolution was authorized: September 20, 2016

Effective date of dissolution if applicable: \_\_\_\_\_

(no more than 90 days after dissolution file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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)

Luis H. Izquierdo

(Typed or printed name of person signing)

Chief Executive Officer

(Title of person signing)

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TALLAHASSEE, FLORIDA

From:

09/22/2016 13:53

#667 P.003/003

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### 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: Economic Self-Sufficiency Center of Perrine, Inc.

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:

Provide a reasonable description of the claim to which the claimant might be entitled. Provide the amount of the claim and any interest obligation if fixed by an instrument of indebtedness. The claim must be in writing and sent to the attention of Jerry Knutson, CFO, at the address below.

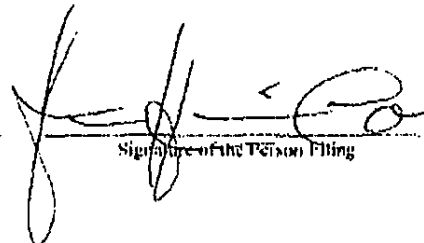
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

6100 Blue Lagoon Drive, Suite 365, Miami, FL 33126

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.

Luis H. Izquierdo

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