

PI10000090911

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(Requestor's Name)

\_\_\_\_\_  
(Address)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

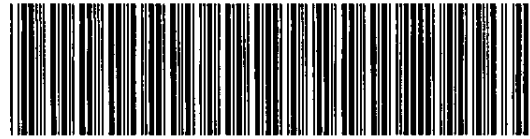
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400251448704

09/12/13--01015--002 \*\*35.00

*Handwritten signature*

FILED  
2013 NOV -5 AM 8:30  
SEVENTH JUDICIAL CIRCUIT  
TALLAHASSEE, FLORIDA

*Handwritten signature*  
11/7/13



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 20, 2013

RICARDO LA TORRE  
BAY ENGINE EQUIPMENT & TRANSPORT, INC  
17829 SAILFISH DR  
LUTZ, FL 33558

SUBJECT: BAY ENGINE EQUIPMENT & TRANSPORT, INC  
Ref. Number: P11000090911

We have received your document for BAY ENGINE EQUIPMENT & TRANSPORT, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Revocation of Dissolution cannot be filed for an active Florida corporation. If you are trying to voluntarily dissolve the corporation enclosed is information on filing Articles of Dissolution.

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.

Teresa Brown  
Regulatory Specialist II

Letter Number: 113A00022207

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** BAY ENGINE EQUIPMENT & TRANSPORT, INC

**DOCUMENT NUMBER:** P11000090911

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

Please return all correspondence concerning this matter to the following:

RICARDO LA TORRE

(Name of Contact Person)

BAY ENGINE EQUIPMENT & TRANSPORT, INC

(Firm/Company)

17829 SAILFISH DR

(Address)

LUTZ, FL 33558

(City/State and Zip Code)

For further information concerning this matter, please call:

RICARDO LA TORRE

(Name of Contact Person)

at ( 813 ) 2993068

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |  |   |   |
|---|--|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>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

RECEIVED  
13 NOV -5 AM 7:57  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FILED

FIRST: The name of the corporation as currently filed with the Florida Department of State: **BAY ENGINE EQUIPMENT & TRANSPORT INC**

SECOND: The document number of the corporation (if known): **P11000090911**

THIRD: The date dissolution was authorized: **09/30/2013**

Effective date of dissolution if applicable: **09/30/2013**  
(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)

**RICARDO LA TORRE**

\_\_\_\_\_  
(Typed or printed name of person signing)

**PRESIDENT**

\_\_\_\_\_  
(Title of person signing)

**Filing Fee: \$35**