

P120000 11335

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

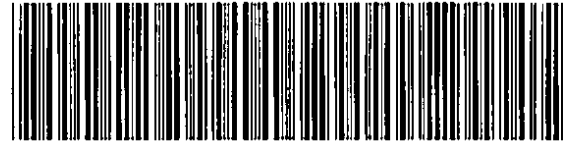
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2020 JAN -6 PM 3:47

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Any Diss
w/notice

FEB 05 2020
I ALBRITTON

GIORGIO L. RAMIREZ, P.A.

ATTORNEY AT LAW

7300 N. KENDALL DRIVE, SUITE 520
MIAMI, FLORIDA 33156

TELEPHONE (305) 670-1930

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December 27, 2019

Department of State
Division of Corporations
Amendment Section
P.O. Box 6327
Tallahassee, FL 32314

**Re: Articles of Dissolution
Document No. P12000011335
Del Istmo Corp.**

Dear Sir or Madam:

Enclosed, please find a cover letter and the Articles of Dissolution and Notice of Corporate Dissolution along with a check payable to the Division of Corporations for the \$35 filing fee.

Should you have any questions with regards to the above, please do not hesitate to contact me.

Sincerely,



GIORGIO L. RAMIREZ
For the Firm

GLR/jv

ARTICLES OF DISSOLUTION

Pursuant to §607.1401, Fla. Stat., 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:

DEL ISTMO CORP.

SECOND: The document number of the corporation is: **P12000011335**

THIRD: The file date of the articles of incorporation: **02/01/2012**

FOURTH: (CHECK AT LEAST ONE BOX)

- ☒ None of the corporation's shares have been issued.
☐ The corporation has not commenced business.

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.

DEL ISTMO CORP.

s/


Elias Bahaia, President and Director

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2020 JAN -6 PM 3:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 §607.1407, Fla. Stat.

Name of Corporation: **DEL ISTMO CORP.**

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

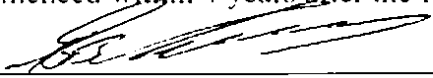
Description of information that must be included in a claim:

1. Name, Address, Phone Number, and Email of claimant
2. Nature of Claim (e.g. services rendered, services to be provided, contract dispute, etc.)
3. Amount of Claim
4. Copies of any and all documents in support of claim

Mailing address where claims can be sent:

c/o Giorgio L. Ramirez, Esq.
Giorgio L. Ramirez, P.A.
7300 N. Kendall Dr., Suite 520
Miami, FL 33156

A claim against the above named corporation will be barred unless a proceeding to the claim is commenced within 4 years after the filing of this notice.

s/ 

Elias Bahaia, President and Director