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





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R. WHITE

B AUG 29 PH 4: 33
SECRETARY OF STATE

ANDREW M. PARISH, P.A.

ATTORNEYS AT LAW
EXCLUSIVE MAILING ADDRESS
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MIAMI OFFICE

GABLES INTERNATIONAL PLAZA PENTHOUSE ID CORAL GABLES, FLORIDA

FORT LAUDERDALE OFFICE

BANK OF AMERICA BUILDING 401 EAST LAS OLAS BOULEVARD

August 28, 2013

VIA FEDERAL EXPRESS
TRACKNG NUMBER 802631488570

Amendment Section
Division of Corporations
Florida Department of State
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida32301

ANDREW M. PARISH

DIRECT DIAL: (305) 778-8133

APARISH@APARISHLAW.COM

Articles of Dissolution Petitioner; IOD Logistics, *Inc.* Document No. P12000046110

To whom it may concern:

Enclosed herewith please find our cover letter, Articles of Dissolution, Notice of Dissolution, and check in the amount of THIRTY FIVE DOLLARS (\$35) requesting the dissolution of the referenced entity.

Please address the acknowledgment of receipt of this request to the undersigned addressed to the Hollywood, Florida Post Office Box listed above.

Sincerely yours,

Androw M. narish

AMP/xx Enclosures

COVER LETTER

TO:	Amendment Section		
	Division of Corporations		

SUBJECT: DISSOLUTION - IOD LOGISTICS, INC.
DOCUMENT NUMBER: P12000046110
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ENRIQUE LARACH, PRESIDENT
(Name of Contact Person)
IOD LOGISTICS, INC.
(Pirm/Company)
7850 NW 80TH STREET - SUITE 3
(Address)
MEDLEY, FLORIDA 33166
(City/State and Zip Code)
For further information concerning this matter, please call:
ANDREW PARISH, ESQ. at (305) 7788133
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

PIRST:	The name of the corporation as currently filed with the Florida Department of Station LOGISTICS, INC.	e:		
SECOND:	The document number of the corporation (if known): P12000046110			
THIRD:	The file date of the articles of incorporation: 5/16/12			
FOURTH:	(CHECK AT LEAST ONE BOX)			
	None of the corporation's shares have been issued.			
	The corporation has not commenced business.	TAT SE(ಪ	
FIFTH:	No debt of the corporation remains unpaid.	CRETA	AU6	
S(ХТН:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	TRETARY OF S LAHASSEE, FI	29 階	
SEVENTH:	Adoption of Dissolution (CHECK ONE)	TOUND!	h: 32	_
	A majority of the incorporators authorized the dissolution.	≯ '∜'	2	
	A majority of the directors authorized the dissolution.			
√ Sign	ature: (By a director, president or other officer - If directors or officers have not been selected, by an incorpora in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary,)	tor - If		

ENRIQUE LARACH,

(Typed or printed name of person signing)

DIRECTOR/PRES/INCORPORATOR

(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, P.S. This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Name of Corporation: IOD LOGISTICS, 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: ANY AND ALL INFORMATION REGARDING ANY AND ALL CLAIMS, INCLUDING NATURE OF TRANSACTION(S) AND RELATED WRITTEN COMMUNICATION AND ALL INVOICES Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) IOD LOGISTICS, INC. C/O ENRIQUE LARACH 7850 NW 80TH STREET - SUITE 3 MEDLEY, FLORIDA 33166 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, ENRIQUE LARACH

Printed Name of the Person Filing