

P12000057282

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

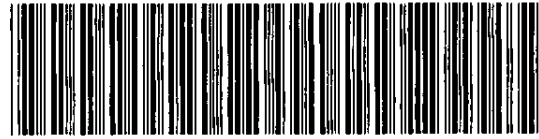
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 6 2013

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Corporation

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

RAFAEL IGLESIAS
(Name of Contact Person)

ADOLAS DEL SUR, INC.
(Firm/Company)

177 OCEAN LANE DR # 208
(Address)

KEY BISCAIYNE, FL 33149
(City/State and Zip Code)

For further information concerning this matter, please call:

RAFAEL IGLESIAS at (305) 984-6354
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status \$43.75 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

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

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: AROMAS DEL SUR, 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:

Company going out of business

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

177 OCEAN LANE DR. #208
KEY BISCAYNE, FL 33149

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.

RAFAEL IGLESIAS

Printed Name of the Person Filing

Rafael Iglesias

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00