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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: CLARA GIRALDO, P.A.

Account Number : 119990000017

: (305)485-9300

Phone Fax Number

: (305)485-1098

DISSOLUTION OR WITHDRAWAL LA OFICINA CORP.

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\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

FIRST:

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 o	f`State:
	LA OFICINA CORP.	
SECOND:	The document number of the corporation (if known): 1.2000	08100:
THIRD:	The date dissolution was authorized: WARCH 24, 20	015.
	Effective date of dissolution if applicable: MARCH Q4 2 (no more than 90 days after dissolution	015 file date)
FOURTH:	Adoption of Dissolution (CHECK ONE)	
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for dissolution
	☐ Dissolution was approved by the shareholders through voting groups.	
,	The following statement must be separately provided for each voting group e to vote separately on the plan to dissolve:	ntitled
	The number of votes east for dissolution was sufficient for approval by	
	(voting group)	
		15 MAR 24 SECRETARY
	Signature: X MUM	I □ ¬<
:	(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)	<u> </u>
	DANIEL RESTREPO.	1: 02 STATE _ORIDA
1	(Typed or printed name of person signing)	
<u>.</u>	PRESIDENT.	

(Title of person signing)