

08/15/16

10:36AM

Jelen Accounting Services Inc

305-591-9167

p.01

P12000089179

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number: (850) 617-6380

From: Account Name: JELLEN ACCOUNTING SERVICES, INC.  
Account Number: 720120000152  
Phone: (305) 591-9167  
Fax Number: (305) 591-9167

DISSOLUTION OR WITHDRAWAL  
CATERBLISS PRODUCTIONS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

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Job Date 2701 04/29/2016 04:09:11PM Send Type

Identification 8506176380  
Duration 1:07  
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HP LaserJet Professional M1212nf MFP  
Fax Confirmation



June 8, 2016

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CATERBLISS PRODUCTIONS, INC.  
3455 SW 99 AVE  
MIAMI, FL 33165US

SUBJECT: CATERBLISS PRODUCTIONS, INC.  
REF: P12000089179

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The required electronic filing cover sheet was not submitted with the document. Please resubmit the document with the electronic filing cover sheet.

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.

Darlene Connell  
Regulatory Specialist III

FAX Aud. #: H16000107490  
Letter Number: 116A00012049

**RECEIVED**

**16 JUN 15 AM 10:57**

**SECURITY INFORMATION**

**AMERICAN ARMY**

08/15/16

10:36AM

Jelen Accounting Services Inc

305-591-9167

p.04

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

## ARTICLES OF DISSOLUTION

2016 AUG 15 AM 11:06

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 of State:  
CATERBLISS PRODUCTIONS, INC.

SECOND: The document number of the corporation (if known): P12000089179

THIRD: The date dissolution was authorized: 04/29/2016

Effective date of dissolution if applicable: 04/29/2016

(no more than 90 days after dissolution file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

FOURTH: Adoption of Dissolution (CHECK ONE)

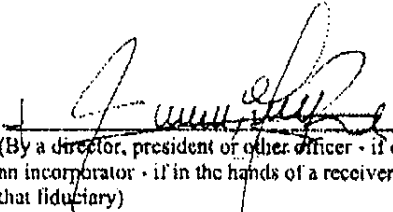
☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ 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)

MARBELIA E ROSAS

(Typed or printed name of person signing)

VP

(Title of person signing)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

2016 AUG 15 AM 11:06

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, F.S.

This "*Notice of Corporate Dissolution*" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: CATERBLISS PRODUCTIONS 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:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

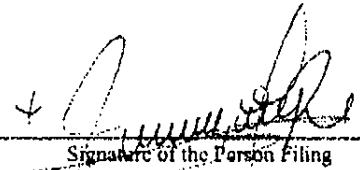
\_\_\_\_\_

\_\_\_\_\_

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.

**MARBELIA A ROSAS**

Printed Name of the Person Filing

  
Signature of the Person Filing