## P13000026081

(Rec	questor's Name)	
(Add	iress)	
(Add	dress)	<u></u>
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	-
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only



800250560628

08/14/13--01017--005 \*\*53.00

A SON A SON

## COVER LETTER

<b>TO:</b> Amendment Section Division of Corporations	
-	TTDESS INC
SUBJECT: AMANECER MA	TIRESS INC
DOCUMENT NUMBER: P130000	)26081
The enclosed Articles of Dissolution and fed	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
HECTOR RODRIGUEZ	
(Name of C	Contact Person)
AMANECER MATTRES	S INC
(Firm	/Company)
2127 N.W. 88th STREE	T
(Ad	dress)
MIAMI, FLORIDA. 2214	7
(City/State	e and Zip Code)
For further information concerning this matt	er, please call:
HECTOR RODRIGUEZ	at (786 ) 308-5853
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amoun	nt:
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee FI 32314	2661 Executive Center Circle

Tallahassee, FL 32301



August 19, 2013

HECTOR RODRIGUEZ AMANECER MATTRESS INC. 2127 N.W. 88TH STREET MIAMI, FL 22147

SUBJECT: AMANECER MATTRESS, INC.

Ref. Number: P13000026081

We have received your document for AMANECER MATTRESS, INC. and your check(s) totaling \$53.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

You failed to sign the document.

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.

Irene Albritton Regulatory Specialist II

Letter Number: 113A00019719

## 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 AMANECER MATTRESS, INC	of Sta	ఔ	
SECOND:	The document number of the corporation (if known): P130000260	<b>)8</b> 1	AUG 3	7
THIRD:	The date dissolution was authorized: 06/30/2013	131 <u>4</u> 1	o P	
	Effective date of dissolution if applicable: 06/30/2013	3- 3-	င္သာ (n	
	(no more than 90 days after dissolution	iñ file da	ırg)	
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes cas was sufficient for approval.	t for d	issolı	ution
	☐ Dissolution was approved by the shareholders through voting groups.			
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitle	ed .	
	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)			
	HECTOR RODRIGUEZ			
	(Typed or printed name of person signing)			
	PRESIDENT			
	(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, F.S.

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

Name of Corporation: AMANECER MATTRESS, INC
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
THE OFFICER CONSIDERED THAT THE COMPETITION WITHIN SOUTH FLORIDA WAS TOO HEAVY.
IN ADDITION, THE OFFICER FELT THERE WAS NO REASON TO STAY IN BUSINESS CONSIDERING
THE CURRENT ECONOMY OF SOUTH FLORIDA.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  2127 N.W. 88th STREET  MIAMI, FLORIDA. 33147
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.  HECTOR RODRIGUEZ  Printed Name of the Person Filing  Signature of the Person Filing

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