

P130000054908

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

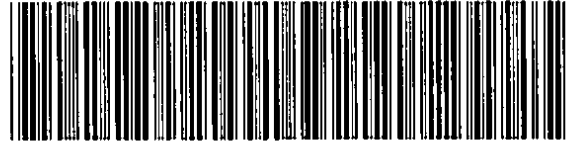
(Document Number)

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07/24/18--01014--002 **43.75

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2018 AUG 10 PM 4:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten signature: R. V. of DIS

AUG 10 2018

I AL BRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: La Caridad Services, Inc.

DOCUMENT NUMBER: P13000054908

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

Please return all correspondence concerning this matter to the following:

Yureilis Carrasco Blanco

Name of Contact Person

Firm/Company

1240 NW 37TH AVE

Address

Miami, FL 33125

City/State and Zip Code

praxedescarrasco8@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Yureilis Carrasco Blanco

Name of Contact Person

305

At ()

450-4142

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 27, 2018

YUREILIS CARRASCO BLANCO
1240 NW 37TH AVE
MIAMI, FL 33125

SUBJECT: LA CARIDAD SERVICES, INC.
Ref. Number: P13000054908

We have received your document for LA CARIDAD SERVICES, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Revocation of Dissolution must be adopted in the same manner as the Articles of Dissolution.

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: 318A00015508

RECEIVED
18 AUG 10 PM 1:59
SECRETARY OF
STATE
TALLAHASSEE, FL 32314

ARTICLES OF REVOCATION OF DISSOLUTION

Pursuant to section 607.1404, Florida Statutes, this Florida profit corporation revokes its Articles of Dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the Articles of Dissolution:

FIRST: The name of the corporation is: La Caridad Services, Inc

SECOND: The document number of the corporation (if known) is P13000054908

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is 07/09/2018.

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: The Revocation of Dissolution was authorized on 07/09/2018

FIFTH: Adoption of Revocation of Dissolution (check one)

- ☐ The board of directors revoked the dissolution.
- ☐ The incorporators revoked the dissolution.
- ☐ The board of directors revoked the dissolution authorized by the shareholders and revocation was permitted by action by the board of directors alone pursuant to that authorization.
- ☒ The shareholders revoked the dissolution and the number of votes cast was sufficient for approval.
- ☐ The shareholders revoked the dissolution by voting groups - the number of votes cast by

_____ was sufficient for approval.
(Voting group)

SIXTH: A copy of the Articles of Dissolution is attached.

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)

Yureilis Carrasco Blanco

(Typed or printed name of person signing)

President

(Title of person signing)

FILED
2018 AUG 10 PM 4:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE \$35

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 of State:
LA CARIDAD SERVICES, INC.

SECOND: The document number of the corporation (if known): P130000054908

THIRD: The date dissolution was authorized: 7-9-18

Effective date of dissolution if applicable: _____

(no more than 90 days after dissolution file date)

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)

Yureilis Carrasco-Blanco
(Typed or printed name of person signing)

President
(Title of person signing)

2018 JUL -9 A M
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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