

(Requestor's Name) (Address)
(Address)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instituctions to 1 ling Officer.

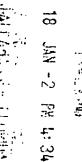
Office Use Only



200307130002

01/02/18--01022--017 ••35.00

JAN () 4 ZOTA



COVER LETTER

Division of Corporations DISSOLUTION OF CORPORATION SUBJECT: P13000059490 **DOCUMENT NUMBER:** The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LINDA VAIL (Name of Contact Person) **VAIL ACCOUNTING & TAX SERVICE** (Firm/Company) 8811 MORAN LANE (Address) **TAMPA FL 33635** (City/State and Zip Code) For further information concerning this matter, please call: (Name of Contact Person) Enclosed is a check for the following amount: ■ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status & Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) STREET ADDRESS: **MAILING ADDRESS:** Amendment Section Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Amendment Section

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

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:

	SUNSHINE CLEANING BY G & A INC
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized: $\frac{ \partial_r \partial_r }{ \partial_r \partial_r \partial_r }$
	Effective date of dissolution if applicable: (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 wi 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
	EVELYN ALVAREZ 5. 6
	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)
	EVELYN ALVAREZ
	(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. SUNSHINE CLEANING BY G & A INC Name of Corporation: 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: WE ARE CLOSING THE BUSINESS EFFECTIVE NOT LATER THAN 12/31/2017 Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) **EVELYN ALVAREZ** 16604 FOOTHILL DRIVE **TAMPA FL 33624** 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. **EVELYN ALVAREZ** Printed Name of the Person Filing