P14000004311

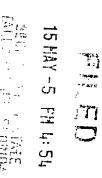
(Red	questor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				





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05/05/15--01015--012 **35.00



(PRM 5-12-15

COVER LETTER

TO: Amendment Section **Division of Corporations**

SUBJECT:		F: 55				
DOCUMENT NUMBER: (21400004311) ρ 1400000431						
The enclosed Articles of Dissolution and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Ruben Leal						
(Name of Contact Person)						
Xpresservices VE, Corp						
(Firm/Company)						
2945 SW 16 Street						
(Address)						
Miami, FL 33145						
(City/State and Zip Code)						
For further information concerning this matter, please call:						
Ruben Leal at ()						
(Name of Contact Person) (Area Code & Daytime Teleph	ione Nun	iber)				
Enclosed is a check for the following amount:						
■\$35 Filing Fee U \$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)	Status & y					
MAILING ADDRESS: STREET ADDRESS:						

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

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

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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 Xpresservice VE, Corp	:
SECOND:	The document number of the corporation (if known):	_
THIRD:	The file date of the articles of incorporation:	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	None of the corporation's shares have been issued.	5 .
	The corporation has not commenced business.	5 HAY -5
FIFTH:	No debt of the corporation remains unpaid.	₹ 1
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	PH 4: 55
SEVENTH	: Adoption of Dissolution (CHECK ONE)	
	A majority of the incorporators authorized the dissolution.	
	☐ A majority of the directors authorized the dissolution.	
Sigr	nature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	r - if
	Ruben Leal	
	(Typed or printed name of person signing)	
	PRES	
	(Title of Person Signing)	

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:	
Date of dissolution will be the date the dissolution is filed wispecified in the <i>Articles of Dissolution</i> .	ith the Department of State or as
Description of information that must be included in a claim:	
Mailing address where claims can be sent: (Claims cannot be	e sent to the Division of Corporations)
2945 Sw 16 Street, Miami FL 33145	
2010 011 10 011001, (Milattii / 2 00 / 10	
A claim against the above named corporation will be barred within 4 years after the filing of this notice.	unless a proceeding to enforce the claim is commenced
•	
Ruben Leal	TAX
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