P14000017950

(Re	equestor's Name)	
(Address)		
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	; #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Dissolution of Corporation (Shares	Issued)			
DOCUMENT NUMBER: P14000017950		· · · · · · · · · · · · · · · · · · ·		
The enclosed Articles of Dissolution and	fee are submitted for filing.			
Please return all correspondence concerning	ng this matter to the following	ng:		
Diego Villanueva				
(Name of	Contact Person)	· · · · · · · · · · · · · · · · · · ·		
And the first the first the second se				
(Firm/Company)				
7157 Deerfoot Point Circle Unit 3				
(A	Address)			
Jacksonville, FL 32256				
(City/State and Zip Code)				
For further information concerning this ma	atter, please call:			
Diego Villanueva	at (<u></u>			
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)		
Enclosed is a check for the following amo	unt:			
■ \$35 Filing Fee	□ \$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	STREET ADDRESS: Amendment Section			

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

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: Diego Villanueva PA		
SECOND:	The document number of the corporation (if known):		
THIRD:	The date dissolution was authorized: 12/31/2015		
	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 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)		
	Diego Villanueva		
	(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: Diego Villanueva PA			
Date of dissolution will be the date the dissolution is filed with the specified in the Articles of Dissolution.	e Department of State or as		
Description of information that must be included in a claim:			
This corporation is no longer operational. All business has stopped and a	all bank accounts closed.		
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	52		
Mailing address where claims can be sent: (Claims cannot be sent	to the Division of Corporations)		
Diego Villanueva			
7157 Deerfoot Point Circle Unit 3			
Jacksonville, FL 32256			
A claim against the above named corporation will be barred unles within 4 years after the filing of this notice.	s a proceeding to enforce the claim is commenced		
Diego Villanueva	01-31-16		
Printed Name of the Person Filing	Signature of the Person Filing		