# P14000031992

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SECRETALY OF STATE SECRETALY OF STATE DIVISION OF CORPORATIONS

2-4-15

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations  $_{\mathrm{SUBJECT:}}$  A THRU Z IMMIGRATION SERVICES INC P14000031992 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Zamira Lafaurie (Name of Contact Person) A Thru Z Immigration Services, Inc. (Firm/Company) 14335 SW 120 St Suite 114 (Address) Miami, FL 33186 (City/State and Zip Code) For further information concerning this matter, please call: at (786 ) 337-2566 Zamira Lafaurie (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: □ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee, Certificate of Status & Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional copy is

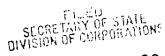
### **MAILING ADDRESS:**

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

enclosed)



# ARTICLES OF DISSOLUTION

15 FEB -2 PM 12: 29

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:
	A thru Z Immigration Services, Inc.
SECOND:	The document number of the corporation (if known): P14000031992
l'HIRD:	The file date of the articles of incorporation: 04/07/2014
FOURTH:	(CHECK AT LEAST ONE BOX)
	☐ None of the corporation's shares have been issued.
	The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	■ A majority of the incorporators authorized the dissolution.
	☐ A majority of the directors authorized the dissolution.
Sign	Tamira Lafaurie  (Typed or printed name of person signing)
	President (Title of Person Signing)
	(The OFF Stone)

Filing Fee: \$35