(Reque	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	state/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Na	me)
(Docui	ment Number	)
Certified Copies	Certificate	s of Status
Special Instructions to Fili	ng Officer:	
Certified Copies	Certificate	

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#### **COVER LETTER**

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations		
SUBJECT: TRUJILLO-BALVIN CORPORATION		
DOCUMENT NUMBER: P14000041162		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
MARIA V TORRES		
(Name of Contact Person)		
TAXPLUS FINANCIAL SERVICES CORP		
(Firm/Company)		
8000 NW 7TH ST STE 200		
(Address)		
MIAMI, FL 33126		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
MARIA V TORRES at (305) 265-8118		
(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 & □ \$52.50 Filing Fee, Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional copy is enclosed)		
MAILING ADDRESS: Amendment Section  STREET ADDRESS: Amendment Section		
Amendment Section Amendment Section Division of Corporations Division of Corporations		
P.O. Box 6327 Clifton Building		

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FILED

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation subthirs the Obliowing articles of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

# TRUJILLO-BALVIN CORPORATION

SECOND: The document number of the corporation (if known): P14000041162

THIRD: The file date of the articles of incorporation: 05/07/2014

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.

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.)

## STEVEN H TRUJILLO

(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.

# ${\tt Name\ of\ Corporation:} \underline{TRUJILLO-BALVIN\ CORPORATION}$

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:

DUE TO	DECONOMIC SITUATION THIS CORPORATE	<b>=</b>
HAS TO	BE CLOSED.	
Mailing address	where claims can be sent: (Claims cannot be sent to the Division of Corporations)	

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.

STEVEN H TRUJILLO

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