P14000047918

(Re	questor's Name)			
(Ad	dress)			
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(Cit	y/State/Zip/Phone	e #)		
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COVER LETTER

TO: Amendment Section

Division of	of Corporations			
SUBJECT:	GRADPARE	NTS ALF	Inc.	
DOCUMENT NU	IMBER: P	1400004791	8	
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
	AN	a Barista		
	· ·	of Contact Person)	_	
	Grand pare	mts ALF rm/Company)	Inc	
	(Fi	rm/Company)		
	3410 1	W Beach	<u>Sr</u>	
	(Address)		
	Tai	pa,76 336	607	
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Ana	BATIS TA of Contact Person)	at (<u>213</u> (Area C	748 – 1304 Code & Daytime Telephone Number)	
Enclosed is a chec	k for the following amo	ount:		
\$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing F Certified Copy (Additional copy enclosed)	See & \$\subseteq\$ \$52.50 Filing Fee, Certificate of Status & Y is Certified Copy (Additional copy is enclosed)	
Amendment Division of P.O. Box	of Corporations	•	STREET ADDRESS: 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:				
	Ginardparents ALF Inc				
SECOND:	The document number of the corporation (if known): P140000 47918	8			
THIRD:	The date dissolution was authorized: September 15, 20)14			
	The date dissolution was authorized: September 15, 26 Effective date of dissolution if applicable: September 15, 26 (no more than 90 days after dissolution file)	214 e date)			
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes cast for was sufficient for approval.	r dissolution			
	☐ Dissolution was approved by the shareholders through voting groups.				
	The following statement must be separately provided for each voting group entito vote separately on the plan to dissolve:	itled			
	The number of votes cast for dissolution was sufficient for approval by				
	(voting group)				
	Signature:	NVERNO PO			
	(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)	STORY OF AMIL			
	AND BATUTA	ATTE			
	(Typed or printed name of person signing) President				
	(Title of person signing)				

Filing Fee: \$35