# Florida Department of State

**Division of Corporations Electronic Filing Cover Sheet** 

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(((H16000129675 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : BARBOSA LEGAL Account Number: I20110000049 : (305)501-4680 Phone

Fax Number

: (305)359-9543

## DISSOLUTION OR WITHDRAWAL CHRISTIANE C. BROOKS, P.A.

Certificate of Status	1
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MAY 26 2016

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## **COVER LETTER**

TO: Amendm Division	ent Section of Corporations		
SUBJECT: CHRI	STIANE C. BROOKS, P.A.		
DOCUMENT NU	J <b>MBER:</b> P14000058597	·	
The enclosed Arti	cles of Dissolution and	fee are submitted for filin	g.
Please return all co	orrespondence concerni	ng this matter to the follow	ving:
	BRU	NA BARBOSA	
	(Name of	Contact Person)	
	BAF	RBOSA LEGAL	•
	(Fir	m/Company)	•
	407 LING	COLN ROAD, PH-NE	
	. (4	Address)	
	MIAMI	BEACH, FL 33139	
	(City/St	atc and Zip Code)	
For further inform	ation concerning this ma	atter, please call:	
BRUNA BARBOSA		at (	
(Name	of Contact Person)		(Daytime Telephone Number)
Enclosed is a chec	k for the following amo	unt:	
□ \$35 Filing Fcc	■ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fcc & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING	ADDRESS:	STR	EET 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

### 05/25/16 04:29PM EDT Barbosa Legal -> Division of Corporations

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8506176380 Pg 3/4 FILEE, SECRETARY OF STATE DIVISION OF CORPORATIONS

#### ARTICLES OF DISSOLUTION

16 MAY 25 AM 9: 47

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: CHRISTIANE C. BROOKS, P.A.				
SECOND:	The document number of the corporation (if known):  P14000058597				
THIRD:	The date dissolution was authorized:				
	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 east 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 east for dissolution was sufficient for approval by				
	(voting group)				
	Signature: /S/ Christiane Brooks				
	(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)				
	Christiane Brooks				
	(Typed or printed name of person signing)				
	MGR				
,	(Title of person signing)				

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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

Filing Fee: \$35

16 MAY 25 AM 9: 47

### **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.

CHRISTIANE C. BROOKS, P.A.

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:

N/A

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

18188 COLLINS AVENUE, SUNNY ISLES BEACH, FL 33160

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.

Bruna Barbosa

/S/BrunaBarbosa

Printed Name of the Person Filing

Signature of the Person Filing