

P15000015916

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

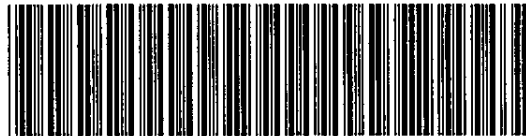
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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02/20/15--01027--023 \*\*35.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
15 APR -3 AM 7:56

C.L.  
4-22-15



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 24, 2015

LYNA MALLOY / VIBE FINANCIAL SOLUTIONS CORP.  
1606 SW 2 CT  
HOMESTEAD, FL 33030 US

SUBJECT: VIBE FINANCIAL SOLUTIONS CORP.  
Ref. Number: P15000015916

We have received your document for VIBE FINANCIAL SOLUTIONS CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis  
Regulatory Specialist II

Letter Number: 815A00003797

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** VIBE FINANCIAL SOLUTIONS CORP

**DOCUMENT NUMBER:** P15000015916

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lyna Malloy  
(Name of Contact Person)  
VIBE Financial Solutions LLC  
(Firm/Company)  
1606 SW 28th  
(Address)  
Homestead FL 33030  
(City/State and Zip Code)

For further information concerning this matter, please call:

Lyna Malloy at 780 , 339-7287  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☐ \$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  
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

## ARTICLES OF DISSOLUTION

15 APR -3 AM 7:56

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:

VIBE FINANCIAL SOLUTIONS CORP.

SECOND: The document number of the corporation (if known): P15000015916

THIRD: The file date of the articles of incorporation: 02-17-2015

FOURTH: (CHECK AT LEAST ONE BOX)

☐ None of the corporation's shares have been issued.

☒ The corporation has not commenced business.

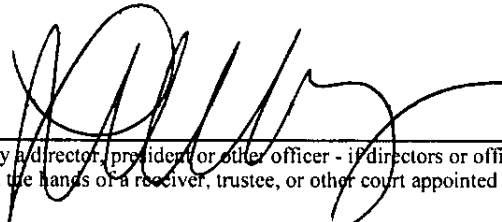
FIFTH: No debt of the corporation remains unpaid.

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.)

Lynn Malloy  
(Typed or printed name of person signing)

President  
(Title of Person Signing)

Filing Fee: \$35