Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210003771053)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : KIJOENNA SERVICES INC

Account Number: I20080000033

: (305)644-3055

Fax Number

: (305)644-3052

DISSOLUTION OR WITHDRAWAL RIVERA ROOFING CORPORATION

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Corporate Filing Menu

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TO: Amendment Section

COVER LETTER

Division	of Corporations		
SUBJECT: RIVER	RA ROOFING CORPORATIO	NO.	
DOCUMENT NU	mber: <u>P/5000</u>	0062366	· · · · · · · · · · · · · · · · · · ·
The enclosed Arti	cles of Dissolution and fe	ee are submitted for filin	ng.
Please return all co	orrespondence concerning	this matter to the follo	wing:
ENNA DIEPPA			
	(Name of 0	Contact Person)	
KRISJOENNA SERV	TICES INC		
	(Fim	ı/Company)	
2141 SW 1 ST , STE	110		
	(Ac	ddress)	
MIAMI, FL 33135			
	(City/Sta	te and Zip Code)	
For further inform	ation concerning this mat	ter, please call:	
ENNA DIEPPA		at (
(Name	of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a chec	k for the following amou	nt:	
≘ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Stams	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	© S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address Amendment Se Division of Co P.O. Box 6327 Tallahassee, Fl	ction iporations	Ain Div The 241	ect Address: endment Section ision of Corporations Centre of Tallahassee 5 N. Monroe Street, Suite 810 lahassee, FL 32303

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: RIVERA ROOFING CORPORATION					
SECOND:	The document number of the corporation (if known):					
THIRD:	The date dissolution was authorized:					
	Effective date of dissolution if applicable: 10/08/2021					
	(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:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.					
!	Signature: - Elvin Rivera					
	(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)					
	ELVIN RIVERA					
	(Typed or printed name of purson signing)					
	PRESIDENT 60 TO					
	(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.

Name of Corporation:	
The above named corporation is the subject of dissolution and the effective date of a dissolution is:	10/08/2021
(date filed with the Dept. if date specified in the Articles of Dissolution)	
Description of information that must be included in a claim:	
NO ACTIVITY	

Mailing address where written claims can be sent; (Claims cannot be sent to the Division of Corpor	ations)
	2021 Al
	्रिक दि
	3356
	PH 12
	05 · · · · · · · · · · · · · · · · · · ·
A claim against the above named corporation will be barred unless a proceeding to enforce the clair within 4 years after the filing of this notice.	n is commenced
ELVIN RIVERA Printed Name of the Person Filing Signature of the Person Filing	<u>a</u>