# P1600006041

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)	)
Certified Copies	Certificate	s of Status
Special Instructions to I	Filing Officer:	
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DIVISIEN OF CORPORATION

FEB 2 4 2016

**C LEWIS** 

#### **COVER LETTER**

**TO:** Amendment Section

Tallahassee, FL 32314

Division of Corporations SOUTH FLORIDA SCIENTIFIC RESEARCH **SUBJECT:** P16000006041 **DOCUMENT NUMBER:** The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Eduardo Navarro (Name of Contact Person) SOUTH FLORIDA SCIENTIFIC RESEARCH (Firm/Company) 10331 SW 23 st (Address) Miami, FL 33165 (City/State and Zip Code) For further information concerning this matter, please call: Eduardo Navarro (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, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **STREET ADDRESS: MAILING ADDRESS:** 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

Pursuant to section 607.1403, Flörida 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:			
	SOUTH FLORIDA SCIENTIFIC RESEARCH Group Inc.			
SECOND:	. , , =			
THIRD:	The date dissolution was authorized:			
	Effective date of dissolution if applicable:    02/07/2016			
	(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 cast 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 following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:  The number of votes cast for dissolution was sufficient for approval by			
	(voting group)			
	Signature:  (By a director, president of 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)			
	Eduardo Navarro			
	(Typed or printed name of person signing)			
	Vice-president			
	(Title of percen signing)			

#### Filing Fee: \$35



## 16 FEB 22 PM 1:35

#### **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: SOUTH FLORIDA SCIENTIFIC RESEARCH
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
,
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.
<b>D D D D D D D D D D</b>
Eduardo Navarro
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