P160000 51485

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phon	e #)
PICK-UP	TIAW	MAIL.
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificate	s of Status
Special Instructions to Filing Officer:		

Office Use Only



700289210737

08/18/16--01025--008 **35.00

MOEINE !!



COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations		
:		
NIEVES LCM REAL ESTATE INC SUBJECT:	. •	
	•	
DOCUMENT NUMBER: P16000051485		
The enclosed Articles of Dissolution and fee are submitted for fil	ing.	
Please return all correspondence concerning this matter to the foll	owing:	
ONAY CONCEPCION GARCIA		
(Name of Contact Person)		
NIEVES LCM REAL ESTATE INC		
(Firm/Company)	· · · · · · · · · · · · · · · · · · ·	
4205 W OHIO AVE	· · · · · · · · · · · · · · · · · · ·	
(Address)		
TAMPA, FL 33614		
(City/State and Zip Code)	-	
For further information concerning this matter, please call:		
ONAY CONCEPTION GARCIA at (813-5062202		
(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 Certificate of Status Certified Copy (Additional copy is enclosed)	\$ 52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	
Amendment Section An Division of Corporations Div	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301



August 30, 2016

ONAY CONCEPCION GARCIA 4205 W OHIO AVE TAMPA, FL 33614

SUBJECT: NIEVES LCM REAL ESTATE, INC. Ref. Number: P16000051485

We have received your document for NIEVES LCM REAL ESTATE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You can not file Article of Revocation on a active corporation.

机设置性 医软骨 医性皮肤 医乳腺 经收益的 网络多种植物 化二氯化邻烷

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.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 216A00018498



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:

SECOND: The document number of the corporation (if known): P16000051485

THIRD: The date dissolution was authorized: 08/30/2016

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

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 number of votes cast for dissolution was sufficient for approval by

(voting group)

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)

ONAY CONCEPTIO GARCIA

(Typed or printed name of person signing)

DIRECTOR

(Title of person signing)