

PI10000062175

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

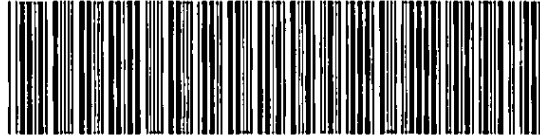
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/09/18--01018--003 **35.00

W/D

R. WHITE

JAN 09 2018

18 JAN -8 AM 11:06
ENTERED



FLORIDA

Executive
Director

Leon M. Biegalski

1/4/2018

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE, FL 32314

CK#2189372527
AMT: \$ 35.00
SCREENER: EBONY

We are returning remittance (s) listed below for the following reasons, as indicated by an XX.

XX Check/Money Order/Document(s) sent to Florida Department of Revenue in error.

Unable to identify- if this remittance is for taxes administered by the Florida Department of Revenue, please enclose appropriate tax return with your tax identification number and return to the address above.

If this is in payment of Federal taxes, please send to the Internal Revenue Service Center, Atlanta, Georgia, 39901. We do not handle any funds designated for the Internal Revenue Service Center.

Your check or money order is not payable to the Florida Department of Revenue and/or is incomplete. Actual payment of taxes cannot be accounted for until this Department receives a correctly completed valid check or money order.

We are returning the attached documentation relating to vehicle title, registration and/or vehicle license tag. The Florida Department of highway Safety and Motor Vehicles or the local tax collector/tag agency should be contacted. You may contact the Florida Department of Highway Safety, Title & Registration at (850)617-2000.

Postal Damage – Your remittance has been damaged by the postal process. We are returning your damaged property. Please complete and forward the enclosed coupon with your response.

We are returning the attached documentation relating to Corporate Tax. The return and documentation you sent is missing the front page or is incomplete. For your convenience, we have included a copy of the front page. Please complete this copy and return with all accompanying documentation to the address listed below.

Other:

Please include this correspondence and any postmarked envelope(s) along with your response to the address below:

Florida Department of Revenue
5050 W Tennessee St Bldg. L
Tallahassee FL 32399-0120

Child Support – Ann Coffin, Director • General Tax Administration – Maria Johnson, Director
Property Tax Oversight – Dr. Maurice Gogarty, Director • Information Services – Damu Kuttikrishnan, Director

<http://dor.myflorida.com/dor/>
Florida Department of Revenue
Tallahassee, Florida 32399-0100

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this profit corporation submit the following articles of dissolution:

FIRST The name of the corporation as currently Filed with the Florida Department of State:

LOVELY KIDS DAY CARE

SECOND The document number of the corporation (if known) P16000062175

THIRD The date dissolution was authorized: DECEMBER 22, 2017

Effective date of dissolution if applicable: DECEMBER 22, 2017

FOURTH Adoption of Dissolution (CHECK ONE)

(x) 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 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 director or officer have not been selected, by an incorporator-if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

YANELIS PADRON ROQUE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

18 JAN -8 AM 11:05

FILED