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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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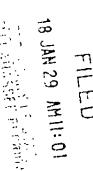
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Voluntary Dissolution of Corporation	on .			
DOCUMENT NUMBER: P16000088176				
The enclosed Articles of Dissolution and	fee are submitted for filin	ıg.		
Please return all correspondence concerning this matter to the following:				
Jennifer Saldana-Hernandez				
(Name of	Contact Person)			
(Fir	m/Company)			
4424 SW 72nd Way				
(/	Address)			
Davie, FL. 33314				
(City/Sta	ate and Zip Code)			
For further information concerning this ma	atter, please call:			
Jennifer Saldana-Hernandez	at (
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)		
Enclosed is a check for the following amou	unt:			
■ \$35 Filing Fee	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)		
MAILING ADDRESS:	STRI	EFT ADDRESS:		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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: Jennifer Elizabeth Saldana-Hernandez, PA					
SECOND:	The document number of the corporation (if known):					
THIRD:	The date dissolution was authorized:					
	Effective date of dissolution if applicable:		_			
	(no more than 90 days after dissolution file days after		will			
FOURTH:	Adoption of Dissolution (CHECK ONE)					
	Dissolution was approved by the shareholders. The number of votes east for owas sufficient for approval.	lissoluti	ion			
	☐ Dissolution was approved by the shareholders through voting groups.					
	The following statement must be separately provided for each voting group entitle to vote separately on the plan to dissolve:					
	The number of votes cast for dissolution was sufficient for approval by	8 JAN 29	FILE			
	(voting group)	MH 11: 01	ED.			
	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)		_			
	Jennifer Saldana-Hernandez					
	(Typed or printed name of person signing)		_			
	Owner/President					
	(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. Jennifer Elizabeth Saldana-Hernandez, PA
Name of Corporation:_____ Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. 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) 4424 SW 72nd Way Davie, FL. 33314 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. Jennifer Saldana-Hernandez Signature of the Berson Filing Printed Name of the Person Filing