P17000004053

(Rec	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer;	
	Q. SILAS	





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COVER LETTER

TO: Amendment Section **Division of Corporations**

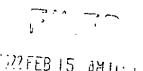
Articles of Dissolution for Gayja Corp. SUBJECT:
DOCUMENT NUMBER: P17000007053
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Luis G. Musa
(Name of Contact Person)
Attorney at Law
(Firm/Company)
55 Merrick Way, #640
(Address)
Coral Gables, FL 33134
(City/State and Zip Code)
For further information concerning this matter, please call:
Luis G. Musa at (at (
(Name of Contact Person) (Area Code) (Daytime Telephone Number
Enclosed is a check for the following amount:
■ \$35 Filing Fee

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:
Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, 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: GAYJA CORP.
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized: February 3, 2022
	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 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: (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)
	Pedro Jaime
	(Typed or printed name of person signing)
	Vice President
	(Title of person signing)

Filing Fee: \$35