

P17000069097

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

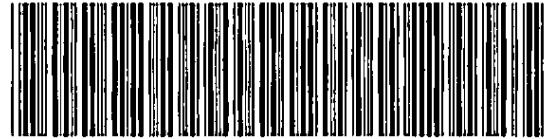
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Rec. phone call from Iris F.
on 3/27/20 to remove claim
form from Filing.

8

Office Use Only



400338944584

03/03/20--01000--010 **35.00

S TALLENT
MAR 27 2020

VLD

2020 MAR 27 AM 7:15



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 2, 2020

IRIS C. FERNANDEZ
INTEGRAL ACCOUNTING PARTNERS, CORP
12555 ORANGE DRIVE, UNIT 4116
DAVIE, FL 33330

SUBJECT: CIDRINES USA, INC.
Ref. Number: P17000069097

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

NOTE THAT THE NOTICE OF CORPORATE DISSOLUTION IS OPTIONAL TO COMPLETE, OTHERWISE IT MUST BE COMPLETED ENTIRELY AND RESUBMITTED ALONG WITH ALL OF YOUR DOCUMENTS.

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.

Susan Tallent
Regulatory Specialist II

Letter Number: 220A00004524

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CIDRINES USA, INC

DOCUMENT NUMBER: P17000069097

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

IRIS C. FERNANDEZ

(Name of Contact Person)

INTEGRAL ACCOUNTING PARTNERS, CORP

(Firm/Company)

12555 ORANGE DRIVE, UNIT 4116

(Address)

DAVIE, FL 33330

(City/State and Zip Code)

For further information concerning this matter, please call:

IRIS C. FERNANDEZ

_____ at (954 - 682-1546

(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 ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

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:

CIDRINES USA, INC.

SECOND: The document number of the corporation (if known): P17000069097

THIRD: The date dissolution was authorized: 01/22/2020

Effective date of dissolution if applicable: 02/01/2020

(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)

MARIA CIDRE

(Typed or printed name of person signing)

DIRECTOR

(Title of person signing)

Filing Fee: \$35

2020 MAR 27 AM 7:15

FILED