

P 17000084428

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

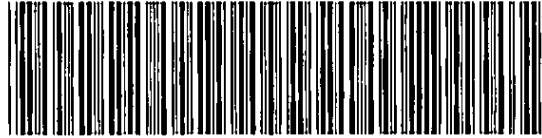
(Document Number)

, Certified Copies _____ Certificates of Status _____

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2018 NOV 19 AM 11:52

CLERK OF STATE
TALLAHASSEE, FL

C. GOLDEN

NOV 21 2018

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution

DOCUMENT NUMBER: P17000084428

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

Please return all correspondence concerning this matter to the following:

Andres M Fernandez Diequez
(Name of Contact Person)

Azul Azul Pool & SPA Services Inc
(Firm/Company)

10921 Citrus Dr.
(Address)

Bonita Springs, FL 34135
(City/State and Zip Code)

For further information concerning this matter, please call:

Andres Fernandez at (239) 450-2515
(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 6, 2018

ANDRES M. FERNANDEZ DIEGUEZ
10921 CITRUS DRIVE
BONITA SPRINGS, FL 34135

SUBJECT: AZUL AZUL POOL & SPA SERVICES, INC
Ref. Number: P17000084428

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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.

Claretha Golden
Regulatory Specialist II

Letter Number: 618A00022842

RECEIVED

2018 NOV 19 PM 12:52

SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLES OF DISSOLUTION

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

FILED
2018 NOV 19 AM 11:52
CLERK OF STATE
TALLAHASSEE, FL

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

Azul Azul Pool & SPA Services Inc.

SECOND: The document number of the corporation (if known): P17000084428

THIRD: The date dissolution was authorized: 10/03/2018

Effective date of dissolution if applicable: 10/03/2018
(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: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

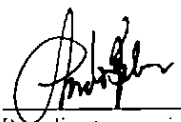
☐ Dissolution was approved by the shareholders through voting groups.

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

2

(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)

Andres M. Fernandez

(Typed or printed name of person signing)

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.

Name of Corporation: Azul Azul Pool & SPA Services, Inc.

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:

Business closed

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

10921 Citrus Dr.
Bonita Springs, FL 34135

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.

Andres M Fernandez Diequez 
Printed Name of the Person Filing Signature of the Person Filing