# P180 000 3044

. (Reque	stor's Name)		
(Addres	ss)		
(Addres	ss)		
(City/St	ate/Zip/Phone #)		
PICK-UP	WAIT MAIL		
(Busine	ess Entity Name)		
(Document Number)			
	Certificates of Status		
Special Instructions to Filin	ng Officer:		
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Office Use Only



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3519



January 15, 2019

PAOLA J DIAZ 18565 SW 104TH AVE CUTLER BAY, FL 33157 US

SUBJECT: ULTRA PARTY GROUP CORP

Ref. Number: P18000030466

We have received your document for ULTRA PARTY GROUP CORP and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a LLC DISSOLUTION, but your entity is a CORPORATION. Please complete and return the enclosed blank form(s).

There is a balance due of \$10.00.

Please return the corrected original and one copy of 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) 245-6051.

Janeice L Smith
Regulatory Specialist II
Registration Section

Letter Number: 519A00001115



January 31, 2019

PAOLA J DIAZ 18565 SW 104TH AVE CUTLER BAY, FL 33157 US

SUBJECT: ULTRA PARTY GROUP CORP

Ref. Number: P18000030466

We have received your document for ULTRA PARTY GROUP CORP and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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There is a balance due of \$10.00.

You failed to make the correction(s) requested in our previous letter.

Please return the corrected original and one copy of 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) 245-6051.

Janeice L Smith
Regulatory Specialist II
Registration Section

Letter Number: 519A00001115

RECEIVED MAR 3 1 2019

### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RE-ARTICLES OF REVOCATION OF DISSOLUTION FOR A FLORIDA PROFIT CORPORATION

Dear

By means of this letter I make the clarification of the articles of dissolution of the profit corp and annex the formats with the necessary corrections.

Lappreciate all your cooperation and understanding in this regard.

I INCLUDE THE COST OF \$10 FOR THE MISSING PAYMENTS.

We appreciate your help.

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: ULTRA PAR	RTY GROUP CORP			
DOCUMENT NUMBER: P18000030466				
The enclosed Articles of Revocation of Disse	olution and fee are submitted for filing.			
Please return all correspondence concerning	this matter to the following:			
PA	OLA J DIAZ			
Name	e of Contact Person			
TRAMITES DE	INMIGRACION USA CORP			
Firm/Company				
18565 SW 104th AVE				
	Address			
ML	AMI FL 33157			
City/	State and Zip Code			
tramitese	isacorp@gmail.com			
E-mail address; (to be use	ed for future annual report notification)			
For further information concerning this matte	er, please call:			
PAOLA J DIAZ	786 5198907 At ( )			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amoun	t:			
■ \$35 Filing Fee U \$43,75 Filing Fee & Certificate of Status				
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			

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	name of a limited liability company is RA PARTY GROUP CORP	· · · · · · · · · · · · · · · · · · ·
2. The .	Articles of Organization were filed on $\frac{037}{2}$	29/2018 and assigned
docu	ment number P18000030466	
Note	terrective date cannot be prior to	of effective on the date of filing: 12/27/2018 or more than 90 days later than date do <del>cument is received for filing)</del> eet the applicable statutory filing requirements, this date will not be intiment of State's records.
4. A des 605.0	scription of occurrence that resulted in the 1707, Florida Statutes, (copy 605,0707 on	: limited liability company's dissolution pursuant to section back cover letter).
	• •	PANY FOR ECONOMIC AND PERSONAL REASONS
		dress of the person appointed to wind up the company's
activi	ities and affairs:	ALL SEC
		HAR 15 PH
5. Signa isted ab	iture of an authorized person or if there ar love to wind up the company's activities a	e no members, the signature of the person appoin and affairs:
Kam	on A Jopez	RAMON A LOPEZ
レ	Signature ${\cal O}$	Printed Name

FILING FEE: \$25.00

## Notice of Limited Liability Company Dissolution

## NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: ULTRA PARTY GROUP CORE	)	
Document number of Limited Liability Company is: P18000030466		
Date of dissolution was: 12/28/2018		<del></del>
Description of information that must be included in a written claim:		
ARTICLES OF DISSOLUTION	6	_
P18000030466	TAL SE	
DATE 12/27/2018	THE STATE OF THE S	Tonia HAR 15
	35.7	TICE PH
		PH 1:42
	15 E	42
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corpo	rations)	
18565 SW 104TH AVE CUTLER BAY FL 33157		
A claim against the above named limited liability company will be barred unless a proceed claim is commenced within 4 years after the filing of this notice.	ing to enfo	orce the
RAMON A LOPEZ Daman A for	<i>0</i> e1	

Printed Name of the Person Filling

Signature of the Person F.Ore.