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Tallahassee, FL 32303

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT; MIAMI LINE BUSINESS, CORP		
DOCUMENT NUMBER: P18000089686		
The enclosed Articles of Dissolution and fe	ee are submitted for filing	
Please return all correspondence concerning	this matter to the following	ng:
LOAMY QUIROZ TORRES		
(Name of C	Contact Person)	
. (Firm	√Company)	
7230 NW 114TH AVE. APT 206	z company)	
(Ac	ddress)	
DORAL, FL 33178		
(City/Star	te and Zip Code)	
For further information concerning this mat	ter, please call:	
LOAMY QUIROZ TORRES	at (⁽⁷⁸⁶⁾ 469-0534	
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amou	nt:	
■ \$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	Amen Divis The C	t Address: Idment Section Ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

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: MIAMI LINE BUSINESS, CORP
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 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.
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\$	Signature: (By a director, president or other officer of 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)
	LOAMY QUIROZ TORRES
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

Filing Fee: \$35