Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (85<del>0</del>)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

Phone

: (305)552-5973

Fax Number

: (305)675-5944

## DISSOLUTION OR WITHDRAWAL RESIDENCIA SAN LAZARO INC

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0
02
\$35.00

Electronic Filing Menu

Corporate Filing Menu

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## 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:
	RECINENCIA State:
	RESIDENCIA SAN LAZARO TNC.
SECOND:	The document number of the corporation (if known): P19000062169
THIRD:	The date dissolution was authorized: 7-21-20
	Effective date of dissolution if applicable:
	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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Si	gnature Comment of the Surger
	(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)
_	ELVIRA RODRIGUEZ
	(Typed or printed name of person signing)
	D =
_	PRESIBEMI
	(Title of person signing)