

P20000042308

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

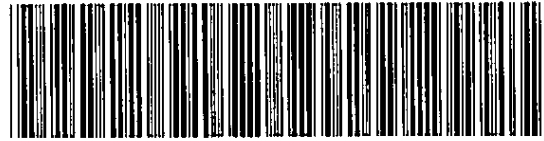
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FEB 25 2022

D CONNELL



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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

SECRETARY OF STATE  
TALLAHASSEE, FL

February 2, 2022

MICHELE PEMBERTON  
4801 S. UNIVERSITY DRIVE, SUITE 219  
DAVIE, FL 33328

SUBJECT: COMMISSIONER MIAMI CORP  
Ref. Number: P20000042308

We have received your document for COMMISSIONER MIAMI CORP, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6050.

Darlene Connell  
Regulatory Specialist II Supervisor

Letter Number: 522A00002657



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 28, 2021

MICHELE PEMBERTON  
4801 S. UNIVERSITY DRIVE, SUITE 219  
DAVIE, FL 33328

SUBJECT: COMMISSIONER MIAMI CORP  
Ref. Number: P20000042308

We have received your document for COMMISSIONER MIAMI CORP and check(s) totaling \$35.00. However, your check(s) and document are being returned for the following:

The form you submitted is for a NOT FOR PROFIT CORPORATION, but your entity is a PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6050.

Darlene Connell  
Regulatory Specialist II Supervisor

Letter Number: 021A00031242

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Commissioner Miami Corp

**DOCUMENT NUMBER:** P20000042308

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

Please return all correspondence concerning this matter to the following:

Michele Pemberton

(Name of Contact Person)

Absolute Accounting and Business Solutions, Inc.

(Firm/Company)

4801 S University Drive, Suite 219

(Address)

Davie, FL 33328

(City/State and Zip Code)

For further information concerning this matter, please call:

Michele Pemberton

at ( 954 )

261-9700

(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

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee

## 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:

Commissioner Miami Corp

SECOND: The document number of the corporation (if known): P20000042308

THIRD: The date dissolution was authorized: 08/18/2021

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.

Signature: \_\_\_\_\_

*Dejha Carrington*

(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)

Dejha Carrington

(Typed or printed name of person signing)

President

(Title of person signing)

FILED  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Filing Fee: \$35