# P21000017168

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: DISSOLUTION	OF DISINFECTION	N RESEARCH AND DEVELO	OPMENT CORP.
DOCUMENT NUMBER:	P21000017168		
The enclosed Articles of D	issolution and fe	e are submitted for filing	
Please return all correspond	lence concerning	this matter to the following	ing:
IVAN MORGADO			
	(Name of C	Contact Person)	
N/A			
	(Firm	/Company)	
2525 PONCE DE LEON BLVD	., STE. 300		
	(Ad	ldress)	
CORAL GABLES, FL 33134			
	(City/Stat	e and Zip Code)	
For further information con	cerning this mat	ter, please call:	
IVAN MORGADO		at ( 305 317-4843	
(Name of Contac	t Person)	(Area Code) (	(Daytime Telephone Number)
Enclosed is a check for the	following amour	nt:	
<del>-</del>	75 Filing Fee & cate 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## 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:  DISINFECTION RESEARCH AND DEVELOPMENT CORP.				
SECOND:	The document number of the corporation (if known): P21000017168				
THIRD:	The date dissolution was authorized: DECEMBER 29, 2023				
	Effective date of dissolution if applicable: DECEMBER 29, 2023				
	(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 not be listed as the document's effective date on the Department of State's records.	will			
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.    Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.				
	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)	<b></b>			
	IVAN MORGADO				
	(Typed or printed name of person signing)	-			
	DIRECTOR				
	(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. DISINFECTION RESEARCH AND DEVELOPMENT CORP. Name of Corporation: The above named corporation is the subject of dissolution and the effective date of a dissolution is: **DECEMBER 29, 2023** (date filed with the Dept. if date specified in the Articles of Dissolution) Description of information that must be included in a claim: NATURE, AMOUNT, AND DATE OF CLAIM IDENTITY OF CLAIMANT PHONE NUMBER, EMAIL, AND RESIDENTIAL ADDRESS OF CLAIMANT (OR BUSINESS ADDRESS IN CASE OF BUSINESS CLAIMANT) IDENTITY AND CONTACT INFORMATION OF ATTORNEY OR OTHER REPRESENTATIVE. IF ANY Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations) IVAN MORGADO 2525 PONCE DE LEON BLVD., STE 300 CORAL GABLES, FL 33134

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00

s/ IVAN MORGADO

Signature of the Person Filing

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.

Printed Name of the Person Filing

IVAN MORGADO