PA20005085

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



700261719377

07/09/14--01005--006 **43.75

JUL -9 PH 12: 04

JUL 2.4 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Rueckert Pharm	aceutical Company	
DOCUMENT NUMBER: P92000	005085	
The enclosed Articles of Dissolution and f	ee are submitted for filing.	
Please return all correspondence concerning	g this matter to the following:	
Eli Jacob		
	Contact Person)	
·		
(Firm/Company)		
9999 Collins Ave, PH 4	H	
Bal Harbour, FL 33154	ddress)	
(City/Sta	te and Zip Code)	
For further information concerning this ma	tter, please call:	
A. Suarez, CPA	at (786) 269-7867	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amou	int:	
□ \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS:	STREET ADDRESS:	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee FI 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

FILED

14 JUL -9 PM 12: 04

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: Rueckert Pharmaceutical Corporation The document number of the corporation (if known): P92000005085 SECOND: The date dissolution was authorized: June 30, 2014 THIRD: Effective date of dissolution if applicable: June 30, 2014 (no more than 90 days after dissolution file date) FOURTH: Adoption of Dissolution (CHECK ONE) Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval. ☐ Dissolution was approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve: The number of votes cast for dissolution was sufficient for approval by (voting group)

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)

Eli Jacob ELI JACOB

(Typed or printed name of person signing)

President PRESIDE

(Title of person signing)

Filing Fee: \$35