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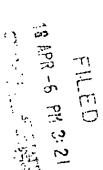
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 9, 2018

ALEX ORTIZ, CPA E ALEX ORTIZ, CPA, PA 2727 PONCE DE LEON BLVD CORAL GABLES, FL 33134

SUBJECT: MILIAN INSURANCE AGENCY, INC.

Ref. Number: P93000073148

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

THE DATE OF DISSOLUTION MUST BE TODAY'S DATE OR A DATE IN THE PAST. THE EFFECTIVE DATE CAN BE A FUTURE DATE.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 218A00004813



## **COVER LETTER**

**TO:** Amendment Section

Tallahassee, FL 32314

Division of Corporations Milian Insurance Agency, Inc. SUBJECT: P93000073148 **DOCUMENT NUMBER:** The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Alex Ortiz, CPA (Name of Contact Person) E Alex Ortiz, CPA, PA (Firm/Company) 2727 Ponce de Leon Blvd (Address) Coral Gables, FL 33134 (City/State and Zip Code) For further information concerning this matter, please call: Alex Ortiz (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: ■ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	· · · · · · · · · · · · · · · · · · ·				
SECOND:					
THIRD:	The date dissolution was authorized:			<del>_</del>	
	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 bling requirements, this date will				
	(no more than 90 days after dissolution tile 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:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes cas was sufficient for approval.	t for d	issolı	ution	
	☐ 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	4	18 APR -6	<b>⊤</b> i	
	(voting group)	**	PH	d3hi	
	Signature:  (By a director, prosident 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)		3: 21	_	
	Santiago Milian				
	(Typed or printed name of person signing)				
	President				
	(Title of person signing)				