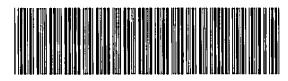
P95000054479

(Requestor's Name)
(Address)
V ,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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11/01/20



COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT:
DOCUMENT NUMBER: P95000054479
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
KYLE R. SAXON, ESQ.
(Name of Contact Person)
SAXON & FINK, LLP
(Firm/Company)
2121 PONCE DE LEON BLVD., SUITE 740
(Address)
CORAL GABLES, FL 33134
(City/State and Zip Code)
For further information concerning this matter, please call:
KYLE R. SAXON, ESQ. at ((305) 371-9575
(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 (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

FILED

ARTICLES OF DISSOLUTION

2020 OCT -1 PH 4: 09

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation subfilication subfilication of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	EAST KENDALL INVESTMENTS, INC.
SECOND:	The document number of the corporation (if known): P95000054479
THIRD:	The date dissolution was authorized: 09/21/2020
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)
	(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: (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)
	ANA LOPEZ-BLAZQUEZ
	(Typed or printed name of person signing)
	CHIEF EXECUTIVE OFFICER
	(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.

(date filed with the Dept. if date specified in the Articles of Dissolution)

Description of information that must be included in a claim:

NATURE AND AMOUNT OF THE CLAIM

Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations)

6855 RED ROAD, SUITE 600

CORAL GABLES, FL 33143

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.

ANA LOPEZ-BLAZOUEZ

Printed Name of the Person Filing

Signature of the Person Filing

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