

P96000056274

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

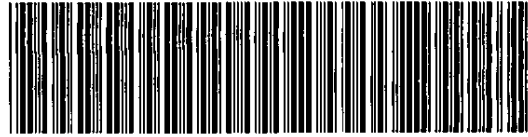
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DIVISION OF CORPORATIONS
11 JUL 12 PM 1:53

FILE DIS
w/notice
@ 7/12/11

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:
ALDO P. GONZALEZ & ASSOCIATES, INC

SECOND: The document number of the corporation (if known): P96000056274

THIRD: The date dissolution was authorized: June 15, 2011

Effective date of dissolution if applicable: June 30, 2011
(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)

Aldo Pablo Gonzalez

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35

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DIVISION OF CORPORATIONS
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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.

Name of Corporation: ALDO P. GONZALEZ & ASSOCIATES, INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

Information identifying the name and address of the claimant

and the subject matter of the claim.

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

Aldo P. Gonzalez, 10661 North Kendall Drive Suite 223, Miami, FL 33176

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.

Aldo P. Gonzalez

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