P96000094431

(Re	equestor's Name)				
(Address)					
(Ad	dress)				
(Cit	ry/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Nan	ne)			
	•				
(Do	ocument Number)				
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					

Office Use Only



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STUDE LANGUE STATE

MAR 2 6 2015 C. CARROTHER:

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: SILHO INVESTMENT CORPORATION
DOCUMENT NUMBER: 79600094431
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SIEGELIED LOVENZ (Name of Contact Person)
SUNNY FLORING REACTY (Firm/Company)
420 LEE BLY) (Address)
,
(City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
SIEGTUE) LOZENZ at (239) 3687111 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status & Certified Copy (Additional copy is enclosed) \$\Bigcup \\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section
Division of Corporations Amendment Section Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

0.371.3

15 HAR 25 AM 8: 51

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:	
	SILHO INVESTHENT CORPORATION	
SECOND:	The document number of the corporation (if known): 796000 94431	
THIRD:	The date dissolution was authorized: $0/28/2015$	
	Effective date of dissolution if applicable: 03/30/2045 (no more than 90 days after dissolution file date)	
FOURTH:	: Adoption of Dissolution (CHECK ONE)	A CHANGE
	Dissolution was approved by the shareholders. The number of votes cast for dissolut was sufficient for approval.	ion
	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)	
	HORIT METENER (Typed or printed name of person signing)	
	The or brings of brings affinish	
	(Title of person siming)	

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.

Name of Corporation:	SILHO IN	vestyci	T COR 202.	ATION	
Date of dissolution will be specified in the Articles of		on is filed with the I	Department of State of	or as	
Description of information	that must be included	l in a claim:			
				•	
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	,				
					_
Mailing address where cla	ims can be sent: (Clair	ms cannot be sent to	the Division of Cor	porations)	
	L1.	/a			
and an activate of the Control of th					
<u> </u>					
A claim against the above within 4 years after the fil		ll be barred unless a	proceeding to enfor	rce the claim is commend	ed
			1 0	\geq_l	
HORST)	TETENTER		host	16 Rus	
Printed N	ame of the Person Filing	~	Signature of t	he Person Filing	

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