P98000012975

| (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: |
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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

pril 25, 2006

ulio P. Lemus Lemus Paint & Body Shop Inc. 4520 N.W. 176 St. Opa Locka, FL 33055

SUBJECT: LEMUS PAINT & BODY SHOP INC.

Ref. Number: P98000012975

We have received your document for LEMUS PAINT & BODY SHOP INC. 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):

If you are trying to dissolve the subject corporation you have submitted the wrong form. Enclosed is the correct form to voluntarily dissolve the subject corporation.

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) 245-6901.

Susan Payne Senior Section Administrator

Letter Number: 906A00028330

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COVER LETTER

| Division of Corporations |
|--|
| SUBJECT: LEMUS PAILE & BOSY SHOP |
| DOCUMENT NUMBER: |
| The enclosed Articles of Dissolution and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Name of Contact Person) LEMUS PAIN 3 BODY SHOP (Firm/Company) |
| (Name of Contact Person) |
| LEMUS PAIN 3 KODY SHOP |
| |
| 4520 M.W. 176 ST. |
| 4520 N.W. 176 St. (Address) OPA-LockA, FL. 33055 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| TULIO LEMUS at (305) 631-7573 (Name of Contact Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| \$\times \text{\$35 Filing Fee} \text{\$\text{\$\subset}\$\$\\$43.75 Filing Fee & \$\text{\$\subset\$\$\subset\$\$\text{\$\subset\$}\$\$\\$43.75 Filing Fee & \$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\\$\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\ |
| MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section |
| Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building |

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION

FILED 06 MAY 23 AM 10: 23

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits floridalism statutes, this Floridal profit corporation submits floridalism statutes, this Floridal profit corporation submits floridalism statutes, this Floridal profit corporation submits floridalism statutes, this Floridalism statutes, the floridalism statutes are statuted in the statutes of the statutes of the statutes of the statutes are statuted in the statutes of the statutes of the statutes are statuted in the statutes of the statutes are statuted in the statutes of the statutes of the statutes are statuted in the statutes of the statutes of the statutes are statuted in the statutes of the statutes o

| FIRST: | The name of the corporation as currently filed with the Florida Department of State: | |
|---|--|--|
| | LE MUS PAINT & BODY SHOP INC. | |
| SECOND: | The document number of the corporation (if known): | |
| THIRD: | The file date the articles of incorporation: $\frac{\partial /9}{98}$ | |
| FOURTH: | (CHECK AT LEAST ONE BOX) | |
| | None of the corporation's shares have been issued. | |
| | ☐ The corporation has not commenced business. | |
| FIFTH: | No debt of the corporation remains unpaid. | |
| SIXTH: | The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued. | |
| SEVENTH: | Adoption of Dissolution (CHECK ONE) | |
| | A majority of the incorporators authorized the dissolution. | |
| A majority of the directors authorized the dissolution. | | |
| | | |
| Signature: Lulio Line | | |
| - Constitution | (By a difector, 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.) | |
| | JULIO LEMUS. | |
| | (Typed or printed name of person signing) | |
| | DWNER / PRESIDENT | |
| | (Title of Verson Signing) | |

Filing Fee: \$35

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