

P99000001285

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

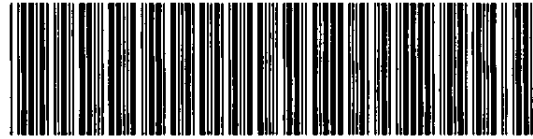
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100255867431

01/16/14--01014--001 **140.00

14 JAN 16 AM 11:06
FILED
JAN 16 2014
FALLSBORO, NJ

APPROVED
AND
FILED

C. LEWIS
JAN 28, 2014
EXAMINER

11:02

Update Payment

01/28/14

DEP Page 0001/0001

Deposit Number	: 01/16/14 01014 001	Deposit Amount	: 140.00
Account Number	:	Deposit Balance	: 0.00
Refund Request Date	:	Debit Memo Date	:
Refund Mail Date	:	Void Date	:
Refund Amount	: 0.00	User ID	: KWALKER
Requester	:		

		DOC Page	0001/0002
Tracking Number	: 100255278121	Document Number	: 100255278121
Ledger Date	: 01/16/14	Sub Account Number	:
Document Requester	:		

<u>Category</u>	<u>Description</u>	<u>Amount</u>
CF	ALL CORP FILING FEES	35.00

<Ctrl>A - Add Pay <Ctrl>R - Rem pay <Ctrl>D - Print doc <Ctrl>V - Print check

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: Central Business Management Inc.

Name of Resulting Florida Profit Corporation

The enclosed ~~Certificate of Conversion~~ *Dissolution Corp* Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

Rafael J. Sanchez-Aballi, Esquire

Contact Person

Rafael J. Sanchez-Aballi, P.A.

Firm/Company

2506 Ponce de Leon Boulevard, Second Floor

Address

Coral Gables, Florida 33134

City, State and Zip Code

rsa@sanchez-aballi.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rafael J. Sanchez-Aballi, Esquire at 305 779-5041

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$105.00 Filing Fees ☐ \$113.75 Filing Fees and Certificate of Status ☐ \$113.75 Filing Fees and Certified Copy ☐ \$122.50 Filing Fees, Certified Copy, and Certificate of Status

STREET ADDRESS:

Charter Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Charter Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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:
CENTRAL BUSINESS MANAGEMENT, INC.

SECOND: The document number of the corporation (if known): P99000001285

THIRD: The date dissolution was authorized: January 8, 2014

Effective date of dissolution if applicable: January 9, 2014

(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)

Aurelio Estrada

(Typed or printed name of person signing)

President/Director

(Title of person signing)

Filing Fee: \$35

14 JAN 16 AM 11:07
SEC. OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED