## P99000010119

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## **COVER LETTER**

Division of Corporations		
SUBJECT: Julio R. Rivas & Associates, Inc.		
DOCUMENT NUMBER: P99000010119		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Julio R. Rivas		
(Name of Contact Person)		
(Firm/Company)		
(Firm/Company) 506 NW 87th Avenue, Apt. 103		
(Address)		
Miami, FL 33172		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Julio R. Rivas at (305) 221-8638		
(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		
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle		

Tallahassee, FL 32301

## 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:  Julio R. Rivas & Associates, Inc.			
SECOND:	P990001011	9		
THIRD:	The date dissolution was authorized: January 1, 2013			
mind.	Effective date of dissolution <u>if applicable</u> : January 1, 2013  (no more than 90 days after dissolution	ı 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			
		<b>13</b>		
	(voting group)	JAN 24		
	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)	13 JAN 24 EM 12: 27		
	Julio R. Rivas			
	(Typed or printed name of person signing)			
	President			
	(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.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: Julio R. Rivas & Associates, Inc.

Date of dissolution will be the date the dissolution is filed with the Department of State or as pecified in the Articles of Dissolution.
Description of information that must be included in a claim:
Name, address and telephone number of creditor.
Amount of claim and the date it was incurred.
Proof of claim.
failing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Julio R. Rivas
P.O. Box 940251
Miami, FL 33194-0251

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.

Julio R. Rivas

Printed Name of the Person Filing

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