P9900093668

(Re	questor's Name)	
(Ad	dress)	<u> </u>
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	



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Office Use Only

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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 1, 2010

Alberto J. Ibarra 8405 NW 53 St. Suite C-101 DORAL, FL 33166

SUBJECT: SELECTA FINE WOODWORK & DESIGN, INC.

Ref. Number: P99000093668

We have received your document for SELECTA FINE WOODWORK & DESIGN, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

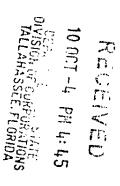
Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

The form that you submitted is incorrect. It is for a corporation that has not commenced business or issued shares. I have enclosed the correct form for you to fill out and return to us.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey Regulatory Specialist II

Letter Number: 310A00023361



COVER LETTER

TO: Amendment Section

Division of Corporations SUBJECT: Selecta Fine Woodwork & Design, Inc DOCUMENT NUMBER: P99000093668 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Alberto J Ibarra (Name of Contact Person) Alberto J Ibarra, PA (Firm/Company) 8405 NW 53St, Suite C-101 (Address) Doral, FL 33166 (City/State and Zip Code) For further information concerning this matter, please call: Alberto J Ibarra (Area Code & Daytime Telephone Number) (Name of Contact Person) 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 Certified Copy Certificate of Status & (Additional copy is **Certified Copy** enclosed) (Additional copy is enclosed) **MAILING ADDRESS: STREET ADDRESS:** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Durcuant to	section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles
of dissolution	
	SECRETARY 8: STAFF. The name of the correction of currently filed with the Florida block for the staff.
FIRST:	The name of the corporation as currently filed with the Florida Department of State RIDA
	SELECTA FINE WOODWORK & DESIGN, INC
SECOND:	The document number of the corporation (if known): P99000093668
THIRD:	The date dissolution was authorized: 09/30/2010
	Effective date of dissolution if applicable: 09/30/2010
	(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: Manle fine V.
	(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)
	Marcela Lara
	(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 Corpora	tion: SELECTA FINE WOODWORK & DESIGN, INC.
	on will be the date the dissolution is filed with the Department of State or as articles of Dissolution.
Description of in	formation that must be included in a claim:
Amount cla	lmed
Description	of Claim
Supporting	Documents
Mailing address v	where claims can be sent: (Claims cannot be sent to the Division of Corporations)
<u>i</u>	Marcela Lara
<u></u>	C/O Alberto J Ibarra, PA
<u> </u>	8405 NW 53 Street, Suite C-101
į	Doral, FL 33166
_	
_	he above named corporation will be barred unless a proceeding to enforce the claim is commenced ter the filing of this notice.
	D D 1
Marcela La	
	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