(Re	equestor's Name)	<u></u> .
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(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	ne #)
PICK-UP	MAIT	MAIL
(Bu	rsiness Entity Na	me)
(Do	ocument Number	)
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
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07/28/08--01034--006 \*\*43.75

Dissolution W/Notice
TB 8/4/18

## **COVER LETTER**

**TO:** Amendment Section **Division of Corporations** SUBJECT: ARTICLE OF DISSOLUTION **DOCUMENT NUMBER:** The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: BERNARDO LEVINSTEIN (Name of Contact Person) SUPERSONIC SERVICES INC (Firm/Company) 12399 SW 53 RD ST (Address) COOPER CITY FL 33330 (City/State and Zip Code) For further information concerning this matter, please call: at (\_561 **BRAD SHERIBARG** 1 443 0801 (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: □\$35 Filing Fee ②\$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** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

## 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:		
	SUPERSONIC SERVICES INC.		
SECOND:	The document number of the corporation (if known): \\\\ \sqrt{53004}		
THIRD:	The date dissolution was authorized: AUG 29 2007		
	Effective date of dissolution <u>if applicable:</u> AUG 29 2007  (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)  (voting group)		
	SEFFOR		
	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)		
	DERIAR DO LEVIASTEIA (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.

ame of Corporation: SUPERSONIC SERVICES INC.	
ate of dissolution will be the date the dissolution is filed with the Department of State or as ecified in the Articles of Dissolution.	
escription of information that must be included in a claim:	
OMPANY WAS DISSOLVED	
ailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)	·
BACKER & POLIAKOFF	
3111 STIRLING RD	
FT LAUDERDALE FL 33312-6525	
claim against the above named corporation will be barred unless a proceeding to enforce the claim is committed that a years after the filing of this notice.	ienced
BERHARDO LEVINSTELL	
Printed Name of the Person Filing Signature of the Person Filing	<del></del>

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