· (Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
S		

Office Use Only



500132558105

07/10/08--01016--003 \*\*35.00

## **COVER LETTER**

TO: Amendment Section

**Division of Corporations** 

•	
SUBJECT: DISSOLUTION OF	PROFIT CORP.
DOCUMENT NUMBER: P060002299	38
The enclosed Articles of Dissolution and fee are submitted f	or filing.
Please return all correspondence concerning this matter to the	e following:
Torge Alvarez (Name of Contact Person)	
CUSTOM STONE DESI (Firm/Company)	
1500 N. UNIVERSITY (Address)	DR., Sk.105
CORAL SPRINGS FL. (City/State and Zip Code)	33071
For further information concerning this matter, please call:	
Torge Alvarez at (561) (Name of Contact Person) (Area)	
Enclosed is a check for the following amount:	, ,
\$35 Filing Fee \$\sum \$43.75 Filing Fee & \$\sum \$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copenclosed)	Certificate of Status &
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 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:	
	CUSTOM STONE DESIGN INC.	
SECOND:	The document number of the corporation (if known): PO600022998	<u>3</u>
THIRD:	The date dissolution was authorized:	
	Effective date of dissolution if applicable: June 30,2008  (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.	ition
	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)	
	The number of votes cast for dissolution was sufficient for approval by  TALLAHASSETARY OF STATE  (voting group)  (voting group)  SEC, FLORIDA  STATE  ORDAN  STATE  STATE	
`	(By a director, president of 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)	
	Torge Alvarez	
	(Typed or printed name of person signing)	
	Secretary/Treasurer	
	(Title of person signing)	

Filing Fee: \$35