

Division of Corporations Electronic Filing Cover Sheet

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To.

Division of Corporations

Fax Number

: (850)617~6380

From:

: DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A. Account Name

Account Number : 076077001702

Phone

: (407)841-1200

Fax Number

: (407)423-1831

## DISSOLUTION OR WITHDRAWAL TROPI-KEYS CONSTRUCTION CORP.

Certificate of Status	0
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## 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:			
	Tropi-Keys Construction Corp.			
SECOND:	The document number of the corporation (if known): 224034			
THIRD:	The date dissolution was authorized: November 30 , 2013			
	Effective date of dissolution if applicable: December 31, 2013			
•	(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			
	(voring group)	. ē  T		
	To the second			
	Signature: David W- Cer	- iç		
	(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)			
	David W. Levenson			
	(Typed or printed name of person signing)			
	President			
	(Title of person signing)			

Filing Fee: \$35

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## 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: Tropi-Keys Construction Corp.
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 of Claimant:
Address of Claimant:
Amount of Claim:
Basis of Claim:
Daniel Levenson  1172 South Dixie Highway, Suite 574
Coral Gables, FL 33146
A claim against that above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
David W. Levenson Samil W. Com
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