

408163

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

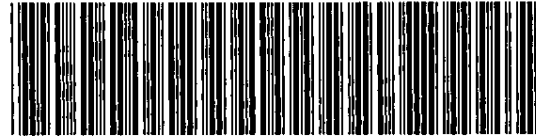
(Document Number)

Certified Copies

Certificates of Status

Special Instructions to Filing Officer:

Office Use Only



500241168115

11/13/12--01006--033 \*\*52.50

VD/ WTBMD

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 NOV 13 PM 1:54

NOV 14 2012

T. ROBERTS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Artcraft Industries Inc.

**DOCUMENT NUMBER:** 408163

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joan T. Lang

(Name of Contact Person)

(Firm/Company)

890 Buttonwood Lane

(Address)

Altamonte Springs Florida 32714

(City/State and Zip Code)

For further information concerning this matter, please call:

Joan Lang

(Name of Contact Person)

at ( 407 ) 929-9058

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>enclosed) |
|--|--|---|--|

**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:

Artcraft Industries, Inc.

SECOND: The document number of the corporation (if known): 408163

THIRD: The date dissolution was authorized: 09/10/2007

Effective date of dissolution if applicable: 09/10/2007

(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

1,000

(voting group)

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)

Joan Lang

(Typed or printed name of person signing)

President

(Title of person signing)

**Filing Fee: \$35**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 NOV 13 PM 1:54

**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: Artcraft Industries Inc.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

**Date, amount, Identification of Claimant**

---

---

---

---

---

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

890 Buttonwood Lane  
Altamonte Springs, Florida 32714

---

---

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.

Joan Lang

Printed Name of the Person Filing

Joan Lang

Signature of the Person Filing

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