506205

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Submost Zilas) name,
(Document Number)
(00000000000000000000000000000000000000
Certified Copies Certificates of Status

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Office Use Only



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Voldio Motice

9-30-05

COVER LETTER

TO: Amendment Section Division of Corporations	
	5 0 - 1.
SUBJECT: Dissolution	of Corporation
DOCUMENT NUMBER:5	06205
The enclosed Articles of Dissolution and	fee are submitted for filing.
Please return all correspondence concernin	g this matter to the following:
Robert G L	ne of Person)
(Nan	ne of Person)
long lool	no + Fahrinatina Tima
(Name of	Firm/Company)
<u> </u>	address)
(A	address)
High Sorings	F 32/643 ite/and Zip Code)
O (City/Sta	ite/and Zip Code)
For further information concerning this ma	tter, please call:
Any K. Mckoberts, CPA	at (<u>386</u>) <u>454 - 6785</u> (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amou	ınt:
\$35 Filing Fee \$43.75 Filing Fee &	\$43.75 Filing Fee & \$\infty\$\$52.50 Filing Fee,
Certificate of Status	Certified Copy Certificate of Status &
	(Additional copy is Certified Copy enclosed) (Additional copy is
	enclosed) (Additional copy is enclosed)
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, Florida 32314	409 E. Gaines Street Tallahassee, Florida 32399
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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:
	Long welding + Fabricating, Inc.
SECOND:	The document number of the corporation (if known): 506305
THIRD:	The date dissolution was authorized: 7/29/05
	Effective date of dissolution if applicable: (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 of 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)
	Signed this day of August, 2005.
	\mathcal{A}
	Signature: Kabut la Chong
	(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)
	Robert C. Lang (Typed or printed name of person signing)
	(1 yped or primed 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 Corporation: Long levelding + Fabricading, Inc.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
Date of Service / Sale
Invoice Number
Copy of Invoice
Name and address of claimant
Telephone and fax of claimant
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Amy R. McRoberts, CPA
23349 NW County Road 236
Suite 20
High Springs, F1 32643
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.
Robert 6. Lova Signature of the Person Filing Signature of the Person Filing