## 672849 Requester's Name

1033 Northern Winter Spring

Office Use Only

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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| ■ Walk in ■ Pick up time                                    | Certifi   | ied Copy                                  |   |
| ☐ Mail out ☐ Will wait                                      | Photocopy   | icate of Status                           |   |
| NEW FILINGS   | <u>AMENDMENTS</u>   | -   |   |
| Profit Not for Profit Limited Liability Domestication Other | Amendment Resignation of R.A., Officer/I Change of Registered Agent Dissolution/Withdrawal Merger | Director                                  |   |
| OTHER FILINGS   | REGISTRATION/QUALIFICATION  | <u>TION</u>                               |   |
| Annual Report Fictitious Name                               | ☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other                               | · · · · · · · · · · · · · · · · · ·       |   |

CR2E031(7/97)

Examiner's Initials

T BROWN MAY 1 4 2001



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 1, 2001

EDWARD L. LOMBARDI, COMPANY, INC. 1033 NORTHERN WAY WHITE SPRINGS, FL 32708

SUBJECT: EDWARD L. LOMBARDI, COMPANY, INC.

Ref. Number: 672849

We have received your document for EDWARD L. LOMBARDI, COMPANY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6869.

Teresa Brown Corporate Specialist

Letter Number: 901A00025835

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution: The name of the corporation is: <u>Faward L. Lombardi</u> FIRST: SECOND: The date dissolution was authorized: THIRD: 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 vote 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 Signature (By the Chairman or Vice Chairman of the Board, President, or other officer)