

674475

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

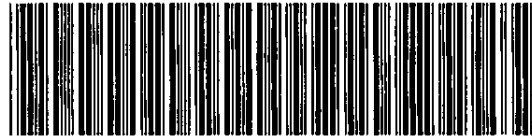
(Business Entity Name)

(Document Number)

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APR 09 2014

R. WHITE

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14 APR -4 AM 10:26  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

14 APR -2 PM 3:13

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

March 19, 2014

ATTN: NISI,DAOTZYY (2ND MAILING) DC  
WILLIAM'S OF MERRITT ISLAND INCORPORATED  
505 LAURIE ST.  
MELBOURNE, FL 32935

SUBJECT: WILLIAM'S OF MERRITT ISLAND INCORPORATED  
Ref. Number: 674475

We have received your document for WILLIAM'S OF MERRITT ISLAND INCORPORATED, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Rebekah White  
Regulatory Specialist II

Letter Number: 414A00004728

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** for William's of Merritt Island Incorporated  
A certificate of withdrawal

**DOCUMENT NUMBER:** 674475

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

Please return all correspondence concerning this matter to the following:

Dao Tzyy Ni  
(Name of Contact Person)

505 Laurie St.  
(Firm/Company)

Melbourne FL  
(Address)

Melbourne, FL 32935  
(City/State and Zip Code)

For further information concerning this matter, please call:

Dao Tzyy Ni at (321) 508-3280  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is 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:

William's of Merritt Island Incorporated

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

674475

THIRD: The date dissolution was authorized:

Feb. 25, 2014

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 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)

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)

Joseph Chung Hua Ni

(Typed or printed name of person signing)

President

(Title of person signing)

FILED  
14 APR -4 AM 10:25  
TALLAHASSEE, FLORIDA

Filing Fee: \$35