(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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JUN -9 2014

R. WHITE

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,	COVER LETTER	date or lilina
TO: Amendment Section Division of Corporations		Please fel in ; date of filing; the attached no
SUBJECT: CENTRAL FLORIDA	BUILDERS' EXC	CHANGE OF Corporat
DOCUMENT NUMBER: 73324	10	CHANGE OF Corporate Silver Shark you
The enclosed Articles of Dissolution at	nd fee are submitted for	r filing.
Please return all correspondence concer	ning this matter to the	following:
PETER N. HILL		
WOLFF HILL McFAR	ame of Contact Person)	RON, P.A.
1851 W. COLONIAL		
ORLANDO, FL 32804	(Address)	
(Ci	ty/State and Zip Code)	
For further information concerning this PETER N. HILL	• •	648-0058
(Name of Contact Person)	(Area Code)) (Daytime Telephone Number)
Enclosed is a check for the following a	mount:	
□ \$35 Filing Fee □ \$43.75 Filing Certificate of		ppy Certificate of Status &

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 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of SCENTRAL FLORIDA BUILDERS' EXCHANGE	State:	
SECOND:	The document number of the corporation (if known): 733240		
THIRD:	Adoption of Dissolution (COMPLETE SECTION I OR II)		
	SECTION I If the corporation has members entitled to vote:		•
	(CHECK/COMPLETE ONE) ☐ The date of meeting of members at which the resolution to dissolve was ado	pted 🐼	
	The number of votes cast by the members wa	s suffici	ent for
	☐ The resolution was adopted by written consent of the members and executed section 617.0701, Florida Statutes.	l in acco	rdance with
	SECTION II If the corporation has no members or members entitled to vote on the diss	olution:	
	The corporation has no members or members entitled to vote on the dissolution		
	The date of adoption of the resolution by the board of directors was $\frac{1/22/2}{4.0}$	-010	 ·
	The number of directors in office was 10 and the vote for resolution was and 0 against. (Must be a majority vote)	, <u>0</u>	for
FOURTH Signature:	Effective date of dissolution, if applicable: (no more than 90 days after dissolution file) (no more than 90 days after dissolution file)	date)	
	(By the chairman or vice chairman of the board, president or other officer- if directors hav selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed that fiduciary)		
	TRUDI LARSON		
	(Typed or printed name of person signing) PRESIDENT (Title of person signing)		

Filing Fee: \$35

CENTRAL FLORIDA BUILDERS' EXCHANGE

NOTICE OF CORPORATE DISSOLUTION

This Notice is filed pursuant to section 617.1407(1)(a) and 617.1408, Florida Statutes.

The Company is not aware of any claims against it, the Company having paid, satisfied and discharged all known claims.

Persons having claims against the Company which are not known to the Company are requested to present them in accordance with this Notice. Claims must be sent to the Company's attorneys, as follows:

Peter N. Hill Wolff, Hill, McFarlin & Herron, P.A. 1851 W. Colonial Drive Orlando, FL 32804

Claims must include the name and address of the Claimant, the amount claimed, and the legal basis for priority, if any, and must be signed by the Claimant, if an individual, or by an authorized officer or agent of the Claimant. Claimants should attach or enclose documentation in support of their claims.

Claims against the Company which are not known to the Company are barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this Notice.

CENTRAL FLORIDA BUILDERS' EXCHANGE

Trudi Larson, President