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(Requestor's Name)
(Address)
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(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations
SUBJECT: DISSOLUTION OF FLORIDA ROAD BOLLUG, INC.
DOCUMENT NUMBER: H28870
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DEBJEAH S. FROST-BRIFFON (Name of Contact Person)
FLORIDA ROAD BORING INC. (Firm/Company)
(Firm/Company)
3654 PEPPER LANE (Address)
(Audiess)
NEW SMYPNA BEACH, PL 32168 (City/State and Zip Code)
For further information concerning this matter, please call:
DEBORAH FROST-BRITTON at (386) 527.9427 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$35 Filing Fee \$\ \bigcup \text{\$43.75 Filing Fee & Certificate of Status} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

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:
	FLORIDA POAD BORING, INC.
SECOND:	The document number of the corporation (if known): # 28870
THIRD:	The date dissolution was authorized:/2 86 208
	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 group
	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)
	OUATE P. O
,	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)
	Typed or printed 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: FLORIDA ROAD BORNG 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 DESCRIPTION OF PRODUCT OR SERVICES, AMOUNT OF
LAM
· · · · · · · · · · · · · · · · · · ·
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
3654 PEAPER W
JEW SAYENA BEACU, FL 32168
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.
1114-01
Printed Name of the Person Filing Signature of the Person Filing