

H64455

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

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Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700042485827

11/09/04--01007--005 **35.00

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04 NOV -9 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EFFECTIVE DATE
11/22/31/04

11/16/04
SO

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION

DOCUMENT NUMBER: H64455

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

Please return all correspondence concerning this matter to the following:

BETSY SMITH

(Name of Person)

CUTOUTS, INC (a Florida Corporation)

(Name of Firm/Company)

7234 SISTER TAGG COVE (new address)

(Address)

GERMANTOWN, TN 38138 (new address)

(City/State/and Zip Code)

For further information concerning this matter, please call:

CHRISTINE E. TOSI

(Name of Person)

at (727) 363-4524

(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, Florida 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

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 Department of State:

CUTOOTS, INC. (a Florida corporation)

SECOND: The document number of the corporation (if known): H64455

THIRD: The date dissolution was authorized: OCTOBER 30, 2004

Effective date of dissolution if applicable: DECEMBER 31, 2004

(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

EFFECTIVE DATE
12/31/04

☒ 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 30 day of OCTOBER, 04

Signature: Betsy Smith

(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)

BETSY SMITH

(Typed or printed name of person signing)

PRESIDENT, DIRECTOR, CHAIRPERSON OF THE BOARD

(Title of person signing)

Filing Fee: \$35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 NOV -9 PM 4:25

FILED

CUTOUTS, INC.

SPECIAL COMBINED MEETING OF THE BOARD OF DIRECTORS AND SHAREHOLDERS

HELD AT THE CORPORATE OFFICES AT 10:15AM ON OCTOBER 30, 2004

ALL REQUIRED NOTICES OF THE MEETING WERE WAIVED

RESOLUTION:

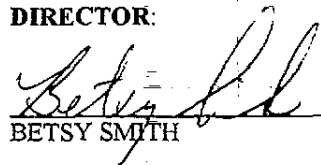
IT IS RESOLVED THAT THE CORPORATION ADOPT A PLAN OF LIQUIDATION BY VOTE OF THE BOARD OF DIRECTORS AND SHAREHOLDERS.

VOTED:

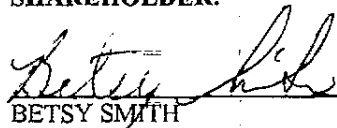
THE BOARD OF DIRECTORS AND SHAREHOLDERS OF CUTOUTS, INC. HEREBY ADOPT A PLAN OF LIQUIDATION TO DISSOLVE THE CORPORATION ANYTIME BY THE END OF THE YEAR ENDING DECEMBER 31, 2004. THE OFFICERS OF THE CORPORATION SHALL FILE ALL NECESSARY DOCUMENTS WITH THE APPROPRIATE AGENCIES AND TAXING AUTHORITIES TO AFFECT THE LIQUIDATION.

SIGNED THIS 30th DAY OF OCTOBER, 2004:

DIRECTOR:


BETSY SMITH

SHAREHOLDER:


BETSY SMITH

I HEREBY CERTIFY THAT THIS IS A TRUE COPY OF THE MINUTES, RESOLUTIONS AND VOTES OF THE BOARD OF DIRECTORS AND SHAREHOLDERS OF CUTOUTS, INC. AT 10:15AM ON OCTOBER 30, 2004.

SECRETARY:


MICHAEL SMITH

DATE OCTOBER 30, 2004

(no corporate seal required)

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: CUTOUTS, INC. (a Florida corporation)

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:

COPIES OF INVOICES OR OTHER DOCUMENTS THAT GIVE RISE TO THE CLAIM.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

BETSY SMITH

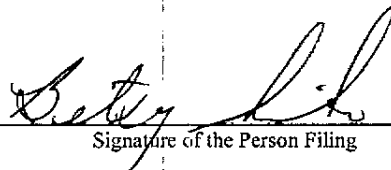
7234 SISTER TAGG COVE

GERMANTOWN, TN 38138

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.

BETSY SMITH

Printed Name of the Person Filing


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00