

H64456

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

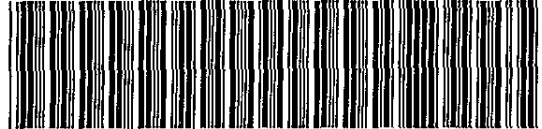
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Edward - GAVE
AUTHORIZATION BY PHONE TO
CORRECT Date of Assn.
DATE 11/5/04
DOC. EXAM afm

Office Use Only



400025599004

12/22/03--01020--014 **35.00

EFFECTIVE DATE
12/31/03

03 DEC 22 AM 8:28
SECRETARY OF STATE
ALABAMA, FLORIDA

FILED

Dissolution
afm
6/5/04

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION OF CONELCO INC

DOCUMENT NUMBER: H. 64456

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

Please return all correspondence concerning this matter to the following:

EDWARD L CONNOP
(Name of Person)

CONELCO INC
(Name of Firm/Company)

659 S.E. LAKEVIEW DRIVE
(Address)

SEBRING FL 33870-3317
(City/State/and Zip Code)

For further information concerning this matter, please call:

EDWARD L CONNOP at (863) 386-0757
(Name of 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, Florida 32314

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

EFFECTIVE DATE

12/31/03

ARTICLES OF DISSOLUTION

FILED

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution: 03 DEC 22 AM 8:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation as currently filed with the Department of State:

CONELCO INC

SECOND: The document number of the corporation (if known): H 64456

THIRD: The date dissolution was authorized: DECEMBER 18, 2003

Effective date of dissolution if applicable: DECEMBER 31, 2003
(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 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

EDWARD L CONNOP, SOLE SHAREHOLD
(voting group)

Signed this 18TH day of DECEMBER 2003

Signature: Edward L Connop PRES

(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)

EDWARD L CONNOP

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

03 DEC 22 AM 8:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Filing Fee: \$35