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	(Requestor's Name)
	(Address)
<u></u>	(Address)
	(City/State/Zip/Phone #)
PICK-UF	P MAIL MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:

Office Use Only



05/04/04--01040--013 \*\*35.00

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## TRANSMITTAL LETTER

**TO:** Amendment Section

Tallahassee, Florida 32314

Division of Corporations
SUBJECT: P. HOOPER, INCORPORATED
DOCUMENT NUMBER: 5 23321
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
BRYAN SKARUPSKI  (Name of Person)
(Name of Person)
(Name of Firm/Company)
P. 0.30 129 (Address)
(Address)
CEDAR KEY, FL 32625 (City/State/and Zip Code)
(City/State/and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (352) 543 5354  (Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$35 Filing Fee \$\times \$43.75 Filing Fee & Certificate of Status \$\times \$Certificate of Status \$\times \$Certified Copy (Additional copy is enclosed) \$\times \$43.75 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:  Amendment Section  Division of Corporations  P.O. Box 6327  STREET ADDRESS:  Amendment Section  Division of Corporations  409 E. Gaines Street

Tallahassee, Florida 32399

## ARTICLES OF DISSOLUTION

of dissolution			
FIRST:	The name of the corporation as currently filed with the Department of State:  P. Hooker, Tworford Ten  The document number of the corporation (if known): 723321		
SECOND:	The document number of the corporation (if known): \( \frac{723321}{}		
THIRD:	The date dissolution was authorized: Are 12 30, 2004		
	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 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 day of		
Signat	(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)		
	(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: P. HOUFER, INCORPORATED
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:
NATURE AND DATE OF CLAIM
NATURE AND DATE OF CLAIM COPY OF PURCHASE ORDER, FUCLUOING
AUTHORIZED SIGNATURE OF DEFICER OF
P. HOOPER TUCORPORATED
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  B. SKARUPSKI  P.O. Box 129  CODAN KBY, FC 32625
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.
BRYAN SKAROPSKI Buy & Shinki
Printed Name of the Person Filing    J   Signature of the Person Filing

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