K08011

(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:				

Office Use Only



300289360833

08/25/16--01021--015 **43.75

2016 AUG 25 PM 2: 4:

SEP 9 2016 C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations SUBJECT: Corporate Dissolution SUBJECT: Corporate Dissolution BOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: William Monroe (Name of Contact Person) (Firm/Company) 1470 Prideaux Road (Address) Osteen, FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe at (407 323 4941 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: S35 Filing Fee Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) MAILING ADDRESS: STREET ADDRESS:	TO: Amendme	ent Section		
SUBJECT: Corporate Dissolution DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: William Monroe (Name of Contact Person) (Firm/Company) 1470 Prideaux Road (Address) Osteen. FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) at (407 323 4941 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: \$\Begin{array} \text{335 Filing Fee} & \$\Begin{array} \text{\$43.75 Filing Fee} & \Begin{array} \text{\$43.75 Filing Fee} & \Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)	Division	of Corporations		
DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: William Monroe (Name of Contact Person) (Firm/Company) 1470 Prideaux Road (Address) Osteen. FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) at (407 323 4941 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: \$\text{\$\text{\$\text{\$\text{\$a\$}}\$}\$ \$\$\text{\$\te				
DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: William Monroe (Name of Contact Person) (Firm/Company) 1470 Prideaux Road (Address) Osteen. FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) at (407 323 4941 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: \$\text{\$\text{\$\text{\$\text{\$a\$}}\$}\$}\$ \$\$\text{\$	Como	mod Dissolution		,
The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: William Monroe (Name of Contact Person) (Firm/Company) 1470 Prideaux Road (Address) Osteen. FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) at (407 323 4941 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: \$\Begin{array} \text{ \$\$35 Filing Fee} \Begin{array} \text{ \$\$\$43.75 Filing Fee} \& \Begin{array} \text{ \$\$\$43.75 Filing Fee} \& \Certificate of Status	SUBJECT: Corpor	rate Dissolution	;	
The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: William Monroe (Name of Contact Person) (Firm/Company) 1470 Prideaux Road (Address) Osteen. FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) at (407 323 4941 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: \$\Begin{array} \text{ \$\$35 Filing Fee} \Begin{array} \text{ \$\$\$43.75 Filing Fee} \& \Begin{array} \text{ \$\$\$43.75 Filing Fee} \& \Certificate of Status		1.		
The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: William Monroe (Name of Contact Person) (Firm/Company) 1470 Prideaux Road (Address) Osteen. FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) at (407 323 4941 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: \$\Begin{array} \text{ \$\$35 Filing Fee} \Begin{array} \text{ \$\$\$43.75 Filing Fee} \& \Begin{array} \text{ \$\$\$43.75 Filing Fee} \& \Certificate of Status		, ,,,		
Please return all correspondence concerning this matter to the following: William Monroe (Name of Contact Person) (Firm/Company) 1470 Prideaux Road (Address) Osteen, FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) at (407 323 4941 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: \$\Begin{array} \text{\$\text{935} Filing Fee} \Begin{array} \$\text{\$\	DOCUMENT NU	MBER:		
Please return all correspondence concerning this matter to the following: William Monroe (Name of Contact Person) (Firm/Company) 1470 Prideaux Road (Address) Osteen, FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) at (407 323 4941 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: \$\Begin{array} \text{\$\$S\$}\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$		1		
William Monroe (Name of Contact Person) (Firm/Company) 1470 Prideaux Road (Address) Osteen, FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) at (407 323 4941 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: \$\Begin{align*} \text{335 Filing Fee} \Begin{align*} \text{\$\text{\$\text{\$43.75 Filing Fee} & Certified Copy} (Additional copy is enclosed)} (Additional copy is enclosed) \$\text{\$\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text	The enclosed Artic	cles of Dissolution and f	ee are submitted for filin	g.
William Monroe (Name of Contact Person) (Firm/Company) 1470 Prideaux Road (Address) Osteen, FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) at (407 323 4941 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: \$\Begin{align*} \text{335 Filing Fee} \Begin{align*} \text{\$\text{\$\text{\$43.75 Filing Fee} & Certified Copy} (Additional copy is enclosed)} (Additional copy is enclosed) \$\text{\$\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text	,			
(Name of Contact Person) (Firm/Company) 1470 Prideaux Road (Address) Osteen, FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) at (407 323 4941 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: \$\Begin{array} \text{\$\$35 Filing Fee} & \Begin{array} \text{\$\$43.75 Filing Fee} & \Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)	Please return all co	orrespondence concerning	g this matter to the follow	ving:
(Name of Contact Person) (Firm/Company) 1470 Prideaux Road (Address) Osteen, FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) at (407 323 4941 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: \$\Begin{array} \text{\$\$35 Filing Fee} & \Begin{array} \text{\$\$43.75 Filing Fee} & \Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)				
(Firm/Company) 1470 Prideaux Road (Address) Osteen, FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) Enclosed is a check for the following amount: (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: (Area Code) (Certificate of Status & Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed)	William Monroe	;		
(Firm/Company) 1470 Prideaux Road (Address) Osteen, FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) Enclosed is a check for the following amount: (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: (Additional copy is enclosed) (Additional copy is enclosed)		h		
(Address) Osteen. FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) Enclosed is a check for the following amount: \$\Begin{array} \text{35 Filing Fee} & \Begin{array} \text{\$43.75 Filing Fee} & \Begin{array} \text{\$43.75 Filing Fee} & \Begin{array} \text{\$43.75 Filing Fee} & \Begin{array} \text{\$52.50 Filing Fee}, \text{\$Certified Copy} & \$Certif		(Name of	Contact Person)	
(Address) Osteen. FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) Enclosed is a check for the following amount: \$\Begin{array} \text{35 Filing Fee} & \Begin{array} \text{\$43.75 Filing Fee} & \Begin{array} \text{\$43.75 Filing Fee} & \Begin{array} \text{\$43.75 Filing Fee} & \Begin{array} \text{\$52.50 Filing Fee}, \text{\$Certified Copy} & \$Certif		· 1		
(Address) Osteen. FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) Enclosed is a check for the following amount: \$\Begin{array} \text{35 Filing Fee} & \Begin{array} \text{\$43.75 Filing Fee} & \Begin{array} \text{\$43.75 Filing Fee} & \Begin{array} \text{\$43.75 Filing Fee} & \Begin{array} \text{\$52.50 Filing Fee}, \text{\$Certified Copy} & \$Certif		(DI		
Osteen. FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) Enclosed is a check for the following amount: \$\Begin{array}{cccccccccccccccccccccccccccccccccccc		· (Firr	n/Company)	
Osteen, FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) Enclosed is a check for the following amount: \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	1470 Prideaux Road			
Osteen, FL 32764 (City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) Enclosed is a check for the following amount: \$\Begin{array}{c} \text{407 323 4941} \\ \text{(Area Code)} \text{(Daytime Telephone Number)} \end{array}\$ Enclosed is a check for the following amount: \$\Begin{array}{c} \text{\$35 Filing Fee} & \Begin{array}{c} \text{\$43.75 Filing Fee} & \Begin{array}{c} \text{\$52.50 Filing Fee}, \\ \text{Certificate of Status} & \text{Certified Copy} \\ \text{(Additional copy is enclosed)} & \text{(Additional copy is enclosed)} \end{array}\$				
(City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) Enclosed is a check for the following amount: □ \$35 Filing Fee Certificate of Status (Additional copy is enclosed) (City/State and Zip Code) (Area Code) (Daytime Telephone Number) □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)		(A	ddress)	•
(City/State and Zip Code) For further information concerning this matter, please call: William Monroe (Name of Contact Person) Enclosed is a check for the following amount: □ \$35 Filing Fee Certificate of Status (Additional copy is enclosed) (City/State and Zip Code) (Area Code) (Daytime Telephone Number) □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	Osteen, FL 32764			
For further information concerning this matter, please call: William Monroe				
William Monroe (Name of Contact Person) Enclosed is a check for the following amount: □ \$35 Filing Fee Certificate of Status (Area Code) (Daytime Telephone Number) \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)		(City/Sta	ite and Zip Code)	
William Monroe (Name of Contact Person) Enclosed is a check for the following amount: □ \$35 Filing Fee Certificate of Status (Area Code) (Daytime Telephone Number) \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)	E 6 1 1 6		1	•
at ((Name of Contact Person) Enclosed is a check for the following amount: □ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) (Area Code) (Daytime Telephone Number) □ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)	For further informa	ation concerning this ma	tter, please call:	
at ((Name of Contact Person) Enclosed is a check for the following amount: □ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) (Area Code) (Daytime Telephone Number) □ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)				
(Name of Contact Person) Enclosed is a check for the following amount: □ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status Certificate of Status (Area Code) (Daytime Telephone Number) □ \$35 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)	William Monroe		407 323 4941	
Enclosed is a check for the following amount: \$\Bigsquare{1}\$\$ \$\\$35\$ Filing Fee \$\Bigsquare{1}\$\$ \$\\$43.75\$ Filing Fee \$\Bigsquare{1}\$\$ \$\\$43.75\$ Filing Fee \$\Bigsquare{1}\$\$ \$Certified Copy (Additional copy is enclosed) \$\Bigsquare{1}\$\$ \$\\$43.75\$ Filing Fee \$\Bigsquare{1}\$\$ \$\Bigsquare{1}\$\$ \$Certified Copy (Additional copy is enclosed)				<u> </u>
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	(Name o	of Contact Person)	(Area Code)	(Daytime Telephone Number)
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Enclosed is a chac	k for the following amou	int:	
Certificate of Status Certified Copy (Additional copy is enclosed) Certificate of Status & Certified Copy (Additional copy is enclosed)	Enclosed is a clied	k for the following amou	iitt,	
Certificate of Status Certified Copy (Additional copy is enclosed) Certificate of Status & Certified Copy (Additional copy is enclosed)	□ \$35 Filing Fee	□ \$43.75 Filing Fee &	■ \$43.75 Filing Fee &	□ \$52.50 Filing Fee.
(Additional copy is Certified Copy enclosed) (Additional copy is enclosed)			S	•
enclosed) (Additional copy is enclosed)				Certified Copy
				(Additional copy is
MAILING ADDRESS: STREET ADDRESS:			,	enclosed)
<u>MAILING ADDRESS:</u> <u>STREET ADDRESS:</u>				
A manufacture of Caratan				
	Amendment Section			
· · · · · · · · · · · · · · · · · · ·	Division of Corporations		Clifton Building	
Tallahassee, FL 32314 2661 Executive Center Circle				

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to sof dissolution	section 607.1403, Florida Statutes, this Florida profit corporation submits the foon:	ollowing articles
FIRST:	The name of the corporation as currently filed with the Florida Department of	of State:
, i	SEABREEZE ENGINEERING ASSOCIATES, INC.	
SECOND:	The document number of the corporation (if known): KOSO	:
THIRD:	The date dissolution was authorized: 8/1/2016	ţ.
	Effective date of dissolution if applicable:	<u> </u>
	(no more than 90 days after dissolution Note: If the date inserted in this block does not meet the applicable statutory filing requirement be listed as the document's effective date on the Department of State's records.	
FOURTH:	Adoption of Dissolution (CHECK ONE)	
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for dissolution
	☐ Dissolution was approved by the shareholders through voting groups.	
: !	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled Syvising
*	The number of votes cast for dissolution was sufficient for approval by	2016 AUG-25
		· 2
	(voting group) ±	PH 2: 43
:	Signature: (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)	,
	William Monroe	
	(Typed or printed name of person signing)	.
	President	
	(Title of person signing)	

SECRETARY OF STATE AND SECRETARY OF STATE AND SECRETARY OF STATE AND SECRETARY OF STATE AND SECRETARY OF SECR

Filing Fee: \$35

Notice of Corporate Dissolution

	1 1
This notice is submitted by the dissolved corporation named below for resolution of payment of ur against this corporation as provided in s. 607.1407, F.S.	known claims
against tins corporation as provided in s. 007.1407, 1.55.	F 1
This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary diss	olution.
Name of Corporation: SEABREEZE ENGINEERING ASSOCIATES, 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:	
Complete accounting of transaction including but not limited to: transaction date, copy of Seabreeze purchase	se order signed
by authorized Seabreeze Representative, proof of delivery, certified copy of original agreement executed by	Seabreeze
Representative and explanation of claim	
	,
	; ;
;	1 1
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)) 4))
William Monroe	į
Attn: Seabreeze Claims	· · · · · · · · · · · · · · · · · · ·
1470 Prideaux Road	* /
Osteen, FL 32764	ı
	, ;
A claim against the above named corporation will be barred unless a proceeding to enforce the clai within 4 years after the filing of this notice.	m is commence
	-
101 1	1
William Monroe William Monroe	/
Printed Name of the Person Filing Signature of the Person Fi	ling

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