K70770

1 .
(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



300116663663

02/04/08--01006--003 **35.00



08 FEB -4 PH 31 43
SECRETARY OF STATE
TALL AHASSEE, FLORID

.E0

COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations Desgolution of Conf. 1470771 DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Contact Person) AAT'S SAYE & Lock TNC =
(Firm/Company) 5790 RODMAN ST. #4 Hollywood, FU 33073 For further information concerning this matter, please call: ART SHOOD at (954) 989-4848

(Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & \$\Bigcup \$43.75 Filing Fee & \$\Bigcup \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Statu Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

fir s t:	The name of the corporation as currently filed with the Florida Department of State: AMT'S SAFE & Lowlh Inc.
SECOND:	The document number of the corporation (if known): 14 70 770
THIRD:	The date dissolution was authorized:
	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
	OFFice MS (voting group)
	(voting group)
	Signature: Timber Mulher
	(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)
	Anthum M. SHOB TR
	(Typed or printed name of person signing)
	pres
	(Title of person signing)

Filing Fee: \$35