

K85899

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

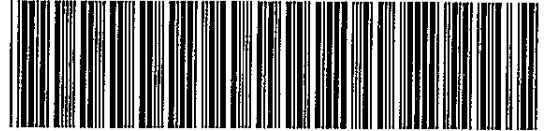
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04 OCT 11 AM 11:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dissolution w/Notice

T. BROWN OCT 15 2004

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MK PERMITTING, INC.

**DOCUMENT NUMBER:** K85899

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

Please return all correspondence concerning this matter to the following:

MEHRDAD KHORASSANI

(Name of Person)

MK PERMITTING INC.

(Name of Firm/Company)

3857 LONG GROVE LANE

(Address)

PORT ORANGE, FL 32129

(City/State/and Zip Code)

For further information concerning this matter, please call:

MEHRDAD KHORASSANI

(Name of Person)

at ( 386 ) 566-6710

(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:

MK PERMITTING, INC.

SECOND: The document number of the corporation (if known): K85899

THIRD: The date dissolution was authorized: OCTOBER 1, 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.

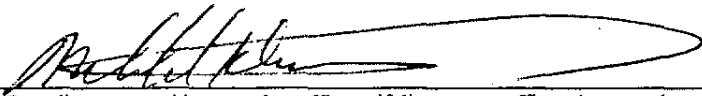
☐ Dissolution was approved by of the shareholders through voting groups.

*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 \_\_\_\_\_, \_\_\_\_\_.

Signature: 

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator or if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

MEHRDAD KHORASSANI

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

**Filing Fee: \$35**

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