135907

(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:		





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05/08/14--01007--009 **35.00



In 03 2014 C. Carrothus



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 20, 2014

ROBERT BLACKSTONE HOBE SOUND CUSTOM CABINETRY INC 1904 NE AVENIDA DRACAENA JENSEN BCH., FL 34957

SUBJECT: HOBE SOUND CUSTOM CABINETRY, INC.

Ref. Number: L35907

We have received your document for HOBE SOUND CUSTOM CABINETRY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the date the dissolution was authorized.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Cathy A Carrothers Regulatory Specialist

Letter Number: 714A00010830

COVER LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: HOBE SOUND CUSTOM CABINETRY INC
DOCUMENT NUMBER: L35907
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ROBERT BLAÇKSTONE
(Name of Contact Person)
HOBE SOUND CUSTOM CABINETRY INC
(Firm/Company)
1904 NE AVENIDA DRACAENA
(Address)
JENSEN BCH. FL. 34957
(City/State and Zip Code)
or further information concerning this matter, please call:
ROBERT BLACKSTONE at (772) 708 2205
(Name of Contact Person) (Area Code & Daytime Telephone Number)
nclosed is a check for the following amount:
1 \$35 Filing Fee \$\top \$43.75 Filing Fee & Certificate of Status \$\text{Certified Copy} (Additional copy is enclosed) \$\text{Certified Copy} (additional
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:

FIRST:	The name of the corporation as currently filed with the Florida Department of Sta HOBE SOUND CUSTOM CABINETRY INC.	ate:		
SECOND:	The document number of the corporation (if known): L35907			
THIRD:	The date dissolution was authorized: JAN 157 2014			
	Effective date of dissolution if applicable:	late)		
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes cast for owas sufficient for approval.	dissolutio		
	☐ Dissolution was approved by 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			
		16		
	(voting group)			
	Signature: Color 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	NIO: 53		
	ROBERT BLACKSTONE			
	(Typed or printed name of person signing)			
	PRES.			
	(Title of person signing)			

Filing Fee: \$35