

N080000000396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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☐

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☐

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(Business Entity Name)

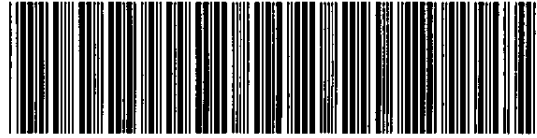
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2009 JAN 15 PM 12:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dissolution

TB

1-23-09

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Article of Dissolution for Cove Connector, Inc.

**DOCUMENT NUMBER:** NO8000000396

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

Please return all correspondence concerning this matter to the following:

April Chattinger  
(Name of Contact Person)

Cove Connector, INC.  
(Firm/Company)

15416 Aribe Ave.  
(Address)

Port Charlotte, FL. 33981  
(City/State and Zip Code)

For further information concerning this matter, please call:

April Chattinger at (941) 697-8112  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |  |   |   |
|---|--|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>enclosed) |
|---|--|---|---|

**MAILING ADDRESS:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

Pursuant to section 617.1401, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

Cove Connector, INC.

SECOND: The document number of the corporation (if known): NO8000000396

THIRD: The file date of the articles of incorporation: Jan. 19, 2008

FOURTH: The corporation has not commenced to conduct its affairs.

FIFTH: No debts of the corporation remains unpaid.

SIXTH: Adoption of Dissolution **(CHECK ONE)**

(Note: Cannot be authorized by an incorporator if the corporation has directors)

☒ The dissolution was authorized by a majority of the directors:  
OR

☐ The dissolution was authorized by an incorporator.

☐ The dissolution was authorized by a majority of the incorporators.

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TALLAHASSEE, FLORIDA

Signature: April Chattinger

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

April Chattinger  
(Typed or printed name of person signing)

Director / Incorporator  
(Title of person signing)

Filing Fee: \$35