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COVER LETTER

Division of Corporations	
SUBJECT: Dissolution - Rob All	en Restoration Inc.
DOCUMENT NUMBER: P000000	> 43336
The enclosed Articles of Dissolution and fee a	re submitted for filing.
Please return all correspondence concerning the	is matter to the following:
Robert Allen	
(Name of Con	itact Person)
Rob Allen Restoration I.	~(
(Firm/C	ompany)
2661 Courty Road (Address	304
	ess)
Bunnell, Fl. 32110	
(City/State a	nd Zip Code)
For further information concerning this matter,	please call:
Rob Allen	at (954) 881-9614
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
(4	\$43.75 Filing Fee & \$\mathbb{\
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION

•	ARTICLES OF DISSOLUTION
Pursuant to s of dissolution	ection 607.1403, Florida Statutes, this Florida profit corporation submits the following articles
FIRST:	The name of the corporation as currently filed with the Florida Department of State. FLORIDA Roballen Restoration Inc.
SECOND:	The document number of the corporation (if known): \\ \frac{90000093336}{}
THIRD:	The date dissolution was authorized: January 11, 2016
	Effective date of dissolution if applicable: (no more than 90 days offer dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not 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 for dissolution was sufficient for approval.
	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
	Sole stockholder (voting group)
	Signature:
	(By a director, president or other officer - if directors or officers have not been selected, by in incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	Typed or printed name of person signing)
	President (Title of person signing)

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims

against this corporation as provided in s. 607.1407, F.S. This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Rob Allen Restoration 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: Basis of claim, documents demonstrating and supporting Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 2661 County Road 304 A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

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

Signature of the Person Filing

Printed Name of the Person Filing