

PO1000010154

(Requestor's Name)

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(City/State/Zip/Phone #)

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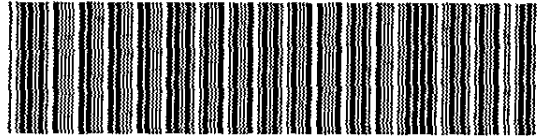
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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dissol

*Hurricane Installation, Inc.  
P. O. Box 880217  
Port St. Lucie, FL 34988-0217  
772-466-8620 (now Treasure Coast Installation, Inc.)  
Fax 772-466-4604*

*Date: November 6, 2002*

*Time: 8:30*

*To: State of Florida Division of Corporations*

*From: Phillip W. Register, President*

*Number of pages including this one: 2*

*Comment: Please process Articles of Dissolution for Hurricane Installation, Inc. Thank you.*

## 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 is: Hurricane Installation, Inc.

SECOND: The date dissolution was authorized: 6-30-02

THIRD: 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 vote 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 5<sup>th</sup> day of November, 2002.

Signature

Phillip Wayne Register  
(By the Chairman or Vice Chairman of the Board, President, or other officer)

Phillip Wayne Register  
(Typed or printed name)

President  
(Title)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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