## PO1000018195

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: DISSOLUTION of Corporation
DOCUMENT NUMBER: 101 0000 18195
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
David Pulleyn - Holden (Name of Contact Person)
Deals on Weels of Fort Landerdale Inc (Firm/Company)
6023 Hulywinel Blvd (Address)
Holywood FL 33024  (City/State and Zip Code)
For further information concerning this matter, please call:
Name of Contact Person) at (863) 307-4079  (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S35 Filing Fee \$\bigs\\$43.75 Filing Fee & \Bigs\\$43.75 Filing Fee & \Bigs\\$52.50 Filing Fee,  Certificate of Status & Certified Copy & Certifi
MAILING ADDRESS: Amendment Section  STREET ADDRESS: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations
- Clifton Building

2661 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 State: The document number of the corporation (if known): 101000 18 SECOND: The date dissolution was authorized: THIRD: Effective date of dissolution if applicable: (nb 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 the shareholders through voting groups. The following statement must be separately provided for each voting group to vote separately on the plan to dissolve: The number of votes cast for dissolution was sufficient for approval by (voting group) 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 that fiduciary)

Filing Fee: \$35

## **Notice of Corporate Dissolution**

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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.
Name of Corporation: Deals on Wheels of Fort Laudendale In  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:
Date, Vendor, Amount of transaction, Description of Item(s) purchased, who authorized purchase, name and signature of receipt.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  2050  SW S  Bteet
Fort Landerdale, FC 3333 2
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.
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Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00