

P01000074183

Full Cycle Construction
1003 S. Kirkman Rd, Ste 2000
Orlando, FL 32822

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) _____ (Document #) **300004795523--9**
-01/25/02--01012--008
*****43.75 *****43.75
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

FILED
02 APR 15 AM 11:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P01600074183
386 FL Dissol
4-15-02
*Outlook

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

January 31, 2002

FULL CIRCLE CONSTRUCTION
1003 S. KIRKMAN RD., SUITE 200C
ORLANDO, FL 32822

SUBJECT: IMPACT STAFFING AND TRAINING, INC.
Ref. Number: P01000074183

We have received your document for IMPACT STAFFING AND TRAINING, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain
Corporate Specialist

Letter Number: 602A00006053

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: Impact Staffing
and Training, Inc.

SECOND: The date dissolution was authorized: November 2, 2001

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 _____ day of _____.

Signature

Wilma J. Williams
(By the Chairman or Vice Chairman of the Board, President, or other officer)

Wilma J. Williams
(Typed or printed name)

Chairman
(Title)

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SECRETARY OF STATE
ALABAMA
ALABAMA, FLORIDA