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(F	Requestor's Name)	
( <i>F</i>	Address)	
	Address)	
	,	
	City (Chata (7 in (Dhana 4	
(C	City/State/Zip/Phone #	)
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
	Document Number)	
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Certified Copies	Certificates of	Status
Certified Copies	Certificates of	Status
Special Instructions t	o Filing Officer:	
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SECRETARY OF STATE
SECRETARY OF

## **COVER LETTER**

**TO:** Amendment Section

Division of Corporations	
SUBJECT: Notice of Dissolut	rion of Hillmen Finc
DOCUMENT NUMBER: POLOGO 1133	89
The enclosed Articles of Dissolution and fee are submitted	for filing.
Please return all correspondence concerning this matter to the	ne following:
Brian E. Hill	
. (Name of Contact Person)	
Firm/Company)	
(Firm/Company)	
5408 Clouds Peak Drive L (Address)	wtz, FC. 33558
` '	
City/State and Zip Code)	)
For further information concerning this matter, please call:	
	Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

Durguent to	section 607 1403. Floride Statutes, this Floride profit corporation submits 0 46 allowing article
of dissolution	section 607.1403, Florida Statutes, this Florida profit corporation submits the fly lowing article on:
	ALLAHASSEE OF STATE
FIRST:	The name of the corporation as currently filed with the Florida Department of State $\frac{1}{2} \frac{\partial \hat{R}^{\prime}/\hat{E}}{\partial \hat{R}}$
	Hillmen Inc.
SECOND:	The document number of the corporation (if known): PO1000   1338-9
THIRD:	The date dissolution was authorized: \2/3\/o\
	Effective date of dissolution if applicable: (no 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 entitled to vote separately on the plan to dissolve:
	The number of votes cast for dissolution was sufficient for approval by
	(voting group)
Si	Signature: (X) Bi Sand
	(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)
	Brian E. Hill
	(Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35