

P 02000053355

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Handwritten signature/initials

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**JOHN D. O'DONNELL**  
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March 29, 2012

Florida Department of State  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

RE: SWORDFISH CORPORATION  
DOCUMENT NUMBER: P02000053355

Dear Sir/Madam:

The enclosed Articles of Dissolution for the above-named corporation are submitted for filing.

Enclosed is a check in the amount of \$52.50 to cover the following fees:

ENCLOSURE

Articles of Dissolution Filing Fee	\$ 35.00
Certified Copy	8.75
Certificate of Status	8.75
	<u>\$ 52.50</u>

After the above has been filed of record, please return the recorded correspondence concerning this matter to this office at the address shown above.

Thank you for your assistance in this matter.

Very truly yours,

  
JOHN D. O'DONNELL

JDO:do

enclosures

## 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:

SWORDFISH CORPORATION

SECOND: The document number of the corporation (if known): P02000053355

THIRD: The date dissolution was authorized: May 10, 2002

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

Jack Corbett

(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)

Jack Corbett

(Typed or printed name of person signing)

PSTD

(Title of person signing)

**Filing Fee: \$35**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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