## P0200098617

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

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## TRANSMITTAL LETTER

**TO:** Amendment Section Division of Corporations

Tallahassee, Florida 32314

SUBJECT:	Artides	of Dispolution	Λ
DOCUMENT NUMBE	R:	1	
The enclosed Articles of	Dissolution and fe	ee are submitted for	filing.
Please return all correspo	ondence concerning	this matter to the fo	ollowing:
We Acro	ndy Kirk (Name of )	Person) Firm/Company)	
_	(Name of )	Firm/Company)	
9310	SW 49	(Address)	
Ft La	ud lidal e (City/s	(Address)  FL 33  State/and Zip Code)	328
For further information	concerning this mat	ter, please call:	
Wendy Kin	of Person)	at (954 (Area Code	895 - 615 7 & Daytime Telephone Number)
Enclosed is a check for t	he following amou	nt:	
	3.75 Filing Fee & tificate of Status	□ \$43.75 Filing Fe Certified Copy (Additional copy enclosed)	
MAILING ADE Amendment Se Division of Cor P.O. Box 6327	etion		STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street

Tallahassee, Florida 32399

## 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 Department of State 2
	Arrow Corp. 題言:
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized: 12-31-2003 Estable: 12-31-2003 Estable: 31-2003 Estable: 31-3003 Estable: 31-3003 Estable: 31-31-2003 Estable: 32-31-2003 Estable: 32-31-2003 Estable: 31-2003 Estable: 32-31-2003 Estable: 3
	Effective date of dissolution if applicable: 12-31, 200 3 (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 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 day of March, 2004
Signat	(By a director, president of 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)
	(Typed or printed name of person signing)
	director president

Filing Fee: \$35

## **Notice of Corporate Dissolution**

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.

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:	Name of Corporation: AVOW COIP
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  Wendy Kirk  9310 Sw 49 St.  Ft. Lauderdale, fr. 33328  A claim against the above named corporation will be barred unless a proceeding to enforce the claim	
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  Wendy Kilf  9310 SW 49 St.  Ft. Lauderdale, ft. 33328  A claim against the above named corporation will be barred unless a proceeding to enforce the claim	Description of information that must be included in a claim:
Wendy KIF  9310 SW 49 St.  Ft. Lauderdale, FL 33328  A claim against the above named corporation will be barred unless a proceeding to enforce the claim	No claims pending.
Wendy KIF  9310 SW 49 St.  Ft. Lauderdale, ft 33328  A claim against the above named corporation will be barred unless a proceeding to enforce the claim	
A claim against the above named corporation will be barred unless a proceeding to enforce the claim	Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
A claim against the above named corporation will be barred unless a proceeding to enforce the claim	Wendy Kilf
A claim against the above named corporation will be barred unless a proceeding to enforce the claim	9310 SW 49 St.
	Ft. Lauderdale, FL 33328
Och Cy Kill May Signafure of the Person Filing Signafure of the Person Filing	Ocaly Kill Under Signafure of the Person Filing Signafure of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00