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## TRANSMITTAL LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: COLORBURST PAINTING, INC.		
DOCUMENT NUMBER: # 0 2000 2 2 4 6 6 3		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
JULIE GRIFFI7HS (Name of Person)		
COLORBURST PAINTING, INC. (Name of Firm/Company)		
914 HACCOWELL CIRCLE (Address)		
(Address)		
ORLANOU, FL. 32828 (City/State/and Zip Code)		
(City/State/and Zip Code)		
For further information concerning this matter, please call:		
Julie Griffiths at (407) 34/-3423 (Name of Person) (Area Code & Daytime Telephone Number)		
(Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
□ \$35 Filing Fee  \$\ \$43.75 Filing Fee  \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, Florida 32314Tallahassee, 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:
	COCORBURST PAINTING, INC.
SECOND:	The document number of the corporation (if known): HO2000224663
THIRD:	The date dissolution was authorized: DEC 01, 2003
	Effective date of dissolution if applicable: DEC 3/, 2003 (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 3 day of DEC , 2003. For \$ 17
Signat	are: SiAIE 9:56
_	(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)
	Julie Griffiths (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

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.

Name of Corporation: COGORBURST PAINTING, NC.
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:
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
COLOREVAST PALATING, INC.
COLOREVAST PALATING, INC.
ORLANDO, FC. 32828
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.
Tocie GRIFFITHS  Printed Name of the Person Filing  Signature of the Person Filing

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