

P02000130322

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

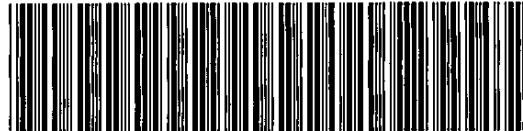
(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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VOID IS w NOTICE
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 7, 2006

ROBERT W. GREBE
GREBE SPRINKLER SYSTEMS, INC.
1586 NE DARLICH AVENUE
JENSEN BEACH, FL 34957

SUBJECT: GREBE SPRINKLER SYSTEMS, INC.
Ref. Number: P02000130322

We have received your document for GREBE SPRINKLER SYSTEMS, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$35.00.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 406A00065616

*Please see your paperwork
We sent check
& wrong corp
form, I was
asked
to re-mailed
correct
form &
you
all have
our check
1257 10/11/06
in the
amount
of
\$ 52.50
Thank you*

*FAX
850-245-
6897*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Corporation Dissolution

DOCUMENT NUMBER: P02000130322

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert W. Grehe
(Name of Contact Person)

Grehe Sprinter Systems Inc.
(Firm/Company)

1586 NE Darlich Av.
(Address)

Jensen Beach FL 34957
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert Grehe at (772) 260-2909
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RECEIVED

06 NOV -6 AM 8:00

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:

Grebe Sprinkler Systems Inc.

SECOND: The document number of the corporation (if known): P02000130322

THIRD: The date dissolution was authorized: 10/1/06

Effective date of dissolution if applicable: 10/1/06
(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)

Signature: *Robert W. Grebe*

(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)

Robert W. Grebe

(Typed or printed name of person signing)

Pres.

(Title of person signing)

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TALLAHASSEE, FLORIDA

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: Grebe Spelable Systems Inc.

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)

P.O. Box 13630
Fort Pierce, FL 34979

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.

Robert W. Grebe
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