

PO300000 4276

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

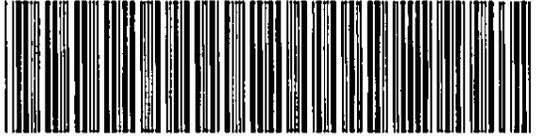
(Business Entity Name)

(Document Number)

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19 APR 19 AM 11:56  
TALLAHASSEE, FLORIDA

APR 23 2019  
S. YOUNG



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 5, 2019

RAYMOND R SUTTON  
HOME ENERGY PERFORMANCE TESTING CO  
583 SUMMERWOOD DRIVE  
MINNEOLA, FL 34715

SUBJECT: HOME ENERGY PERFORMANCE TESTING CO  
Ref. Number: P03000004276

We have received your document for HOME ENERGY PERFORMANCE TESTING CO and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Upon receipt of your letter and/or check(s) totaling \$35.00, no document was found. Please send your document with any fees due to:

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

\* Please return a copy of this letter to ensure your money is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Sheila H. Young  
Regulatory Specialist II

Letter Number: 019A00006831

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2019 APR 11 10 16 AM  
SECRETARY  
TALLAHASSEE, FL

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** HOME ENERGY PERFORMANCE TESTING CO  
\_\_\_\_\_

**DOCUMENT NUMBER:** P03000004276  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Raymond R Sutton  
\_\_\_\_\_

(Name of Contact Person)

\_\_\_\_\_  
(Firm/Company)

583 Summerwood Drive  
\_\_\_\_\_

(Address)

Minneola, FL 34715  
\_\_\_\_\_

(City/State and Zip Code)

For further information concerning this matter, please call:

Raymond R Sutton  
\_\_\_\_\_

(Name of Contact Person)

at ( 321-303-1101  
\_\_\_\_\_  
(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

# 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:  
HOME ENERGY PERFORMANCE TESTING CO

SECOND: The document number of the corporation (if known): P03000004276

THIRD: The date dissolution was authorized: 12/31/18

Effective date of dissolution if applicable: 12/31/18  
(no more than 90 days after dissolution file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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)

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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.)

Raymond R Sutton

\_\_\_\_\_  
(Typed or printed name of person signing)

President, V-P, Secretary, Treasurer

\_\_\_\_\_  
(Title of person signing)