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COVER LETTER

Division of Corporations
SUBJECT: DISSOLUTION of CORPORATION
DOCUMENT NUMBER: PO30000 8414
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ROBIE L. FULBRIGHT UR
(Name of Contact Person)
(Firm/Company)
4635 ST. CROIX CN #12357 (1237) (Address)
NAPLES, FL 34109
(City/State and Zip Code)
For further information concerning this matter, please call:
ROBIE FULBRIGINT at (904) 5375742 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \bigcup \\$43.75 Filing Fee & \bigcup \\$52.50 Filing Fee, Certificate of Status & Certified Copy
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tailahassee, FL 32314 STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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: The document number of the corporation (if known): Po 30000 84 SECOND: The file date of the articles of incorporation: (CHECK AT LEAST ONE BOX) FOURTH: None of the corporation's shares have been issued. The corporation has not commenced business. FIFTH: No debt of the corporation remains unpaid. SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued. SEVENTH: Adoption of Dissolution (CHECK ONE) A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution. 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.)

Filing Fee: \$35

(Title of Person Signing)

. Notice of Corporate Dissolution

Name of Co	Research		equired when filing a voluntary US , INC .	dissolution.
Date of diss	· .	dissolution is filed with t	the Department of State or as	-
Description	of information that must be	included in a claim:		
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Mailing add	ress where claims can be se	nt: (Claims cannot be ser	nt to the Division of Corporation	ns)
Mailing add	4		: · ·	ns)
Mailing add	4		: · ·	ns)
Mailing add	4		nt to the Division of Corporation 1237	ns)
Mailing add	4		: · ·	ns)
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A claim aga	4635 ST. NBBLES,	CRONY L. FC 34)	: · ·	
A claim aga	4635 ST. NRBLES,	CRONY L. FC 34)	N 1237	
A claim aga within 4 yea	4635 ST. NRBLES,	CRONY L. FL 34) ration will be barred unle	N 1237	

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