## P03000043597

(Requestor's Name)
(,
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
•
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: Claudia Telles gave Authorize to make the Concertions.
al 1/20

Office Use Only



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## TRANSMITTAL LETTER

TO: Amendmen Division of	t Section Corporations		
SUBJECT:	distinces closecti		
DOCUMENT N	1UMBER: <u>7030000435</u> 0	77	
The enclosed Ar	ticles of Amendment and fee are s	submitted for filing.	
Please return all	correspondence concerning this m	natter to the following:	
<u></u>	Dozon Autan (Name)	of Person)	
	Select Door & Will (Name of Fi	ndow installation	riEnc.
	5072 NW 124 WA	dress)	
_(	COROL SPINGS FL (City/State/	33076-3447 and Zip Code)	
For further inform	nation concerning this matter, plea	ase call:	
Descript	(Name of Person)	at ( 951 ) 977- (Area Code & Daytime	73CE Telephone Number)
	ck 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 (Additional Copy is enclosed)
Ai Di P.	ailing Address mendment Section vision of Corporations O. Box 6327 Illahassee, FL 32314	Street Address Amendment Section Division of Corpore 409 E. Gaines Street Tallahassee, FL 32	ations et

## 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:  SELECT DOOR & WINDOW TUSTALLA LION, INC.			
SECOND:	The document number of the corporation (if known): P0300043597			
THIRD:	The date dissolution was authorized: Secomber 1, 1003			
	Effective date of dissolution if applicable:  (no more than 90 days after dissolution; 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 14 day of final 2004			
	$\mathcal{L}$			
	Signature: X  (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)			
	(ma: nepoc(siy)			
	Livon Autun (Typed or printed name of person signing)			
	President			
	(Title of person signing)			

## 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: Select Door of Window Installation, 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) 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.