

PD30000068984

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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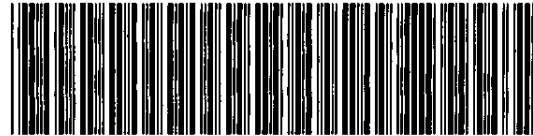
(Business Entity Name)

(Document Number)

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2012 DEC 10 PM 4:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*DOOR*  
*12/11/12*

**COVER LETTER**

**TO: Amendment Section**  
Division of Corporations

**SUBJECT: DISSOLUTION OF A PROFIT CORPORATION**

**DOCUMENT NUMBER: P03000068984**

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

Please return all correspondence concerning this matter to the following:

**ANGELIKA CALKINS**

(Name of Contact Person)

**A.B.C. TRANSPORT**

(Firm/Company)

**274 TAYLOR LN. NW**

(Address)

**PORT CHARLOTTE, FL 33952**

(City/State and Zip Code)

For further information concerning this matter, please call: **629 - 0295 (H)**

**ANGELIKA CALKINS**

(Name of Contact Person)

at ( **941** )

**637 - 2295 (W)**

(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:

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TALLAHASSEE, FLORIDA

FIRST: The name of the corporation as currently filed with the Florida Department of State:  
A.B.C. TRANSPORT OF CHARLOTTE INC.

SECOND: The document number of the corporation (if known): P03000068984

THIRD: The date dissolution was authorized: 8 - 11 - 2012

Effective date of dissolution if applicable: 12-05-2012  
(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

N/A

(voting group)

Signature: Angelika Calkins

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator, or in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

ANGELIKA CALKINS

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35