## P03000072927

(Red	questor's Name)	
(Add	dress)	
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(City	//State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



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Voldis 10/16/06-01021-018 \*\*35.00
Tlewis



## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Dissolution Profit Corp.
DOCUMENT NUMBER: <u>60 300 00 7 29 2.7</u>
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kimberly S. Loudat (Name of Contact Person)
Trust Him Labels a Prints, Inc.
545-D Pitts School Rd.
(Address)  Concord, N. C. 28027  (City/State and Zip Code)
For further information concerning this matter, please call:
Kim Laudat at (704) 785 9769  (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\to\$\$\$\$ \$43.75 Filing Fee & Certificate of Status \$\to\$\$\$ Certificate of Status \$\to\$\$\$ Certificate of Status \$\to\$\$\$ Certified Copy (Additional copy is enclosed) \$\to\$\$ (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327  STREET ADDRESS: Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

## 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 Sete:
	TrustHim labels a Prints, Inc. 题言言
SECOND:	The document number of the corporation (if known): PO 30000 72927
THIRD:	The date dissolution was authorized: 12 31 05
	Effective date of dissolution if applicable: 12/31/05 (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 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
	2
	(voting group)
	mul A = loude +
5	Signature: 4 Minutes James
-	(By a director, president of 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)
	Kimberly S Laudat
	(Typed or primed name of person signing)
	President
•	(Title of person signing)

Filing Fee: \$35

## 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. 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) 545-D Pitts School Rd. Concord, NC 28027 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.