P03000088463

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C.COULLIETTE

OCT 212008

EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: HIKES & ASSOCIATES APPRAISALI, Inc. (Name of Limited Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Person)
HINKS (ASSOC) ATES APPRAISAN, I'm.
3253 FORCKOPT RO APT. G3/2
MIKAHAR FL 33025
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (754) 273 1732 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee & Certificate of Status S55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 2, 2008

HAROLD P. HINES HINES & ASSOCIATES APPRAISALS INC. 3253 FOXCROFT RD., APT G312 MIRAMAR, FL 33025

SUBJECT: HINES & ASSOCIATES APPRAISALS INC.

Ref. Number: P03000088463

We have received your document for HINES & ASSOCIATES APPRAISALS INC. and check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$5.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

You have used the form for a Florida Limited Libility Company dissolution. You need to file Articles of dissolution for a Florida corporation. The filing fee is \$35.

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) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 308A00052370

COVER LETTER

TO: Amendment Section Division of Corporations	•
SUBJECT: HINES / ASSOCIATE	E APPRAISALS, INC
DOCUMENT NUMBER: Po30000	88463
The enclosed Articles of Dissolution and fee a	re submitted for filing.
Please return all correspondence concerning th	is matter to the following:
HANDLA HINES (Name of Cor HINES & ASSOCIATED (Firm/C	
(Name of Cor	stact Person)
HINES & ASSOCIATED	APPRAISALY, IN
(Firm/C	ompany)
3253 FOXCROFT (Address	(KD HOT 6312
(Addr	ess)
MIRANAR FL	33015 .nd Zip Code)
(City/State a	nd Zip Code)
For further information concerning this matter,	, please call:
HANDLA SHINKS (Name of Contact Person)	at (754) 273 /732 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	·
\$35 Filing Fee \$\sum \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & \(\subseteq \\$52.50 \) Filing Fee, Certified Copy Additional copy is enclosed) 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 607.1401, 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:	
	HINES PASSOCIATES HOPPAISALS INC	
SECOND:	The document number of the corporation (if known): 803 000088463	
THIRD:	The file date of the articles of incorporation:	
FOURTH:	(CHECK AT LEAST ONE BOX)	ک مح
	None of the corporation's shares have been issued.	7
	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.	
•		
Sign	ature:	
	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - i in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	f
	HAXOLD HIWES (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	(Title of Person Signing)	
	(Title of Person Signing)	

Filing Fee: \$35