## P03000102852

(Reque	stor's Name)	
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(Addres	is)	
(City/St	ate/Zip/Phone #)	)
PICK-UP	WAIT	MAIL
(Busine	ss Entity Name)	
(Docum	ent Number)	
Certified Copies	Certificates of	Status
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Special Instructions to Filin	g Officer:	
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Dissolution W/ Notice

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

Tallahassee, FL 32314

SUBJECT: Articles of Dissolution	& Notice of Corp	orate Dissolution	
DOCUMENT NUMBER: P03000102852			
The enclosed Articles of Dissolution and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Eileen Olejarski			
(Name of Contact Person)			
Home-King Incorporated			
(Firm/Company)			
PO Box 1573		·	
(A	ddress)	1 1 T	
Cape Canaveral, FL 32920			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Eileen Olejarski (Name of Contact Person)		508-1911	
,	•	& Daytime Telephone Number)	
Enclosed is a check for the following amou	nt:		
\$35 Filing Fee \$\sum \\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status & Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327	Am Div	REET ADDRESS: endment Section ision of Corporations fron 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:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	Home-King Incorporated
SECOND:	The document number of the corporation (if known): P03000102852
THIRD:	The date dissolution was authorized: 10/23/08
	Effective date of dissolution if applicable: (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
	(voting group)
	(voting group)
	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)
	Eileen Olejarski
	(Typed or printed name of person signing)
	Treasurer
	(Title of person signing)

Filing Fee: \$35

## **Notice of Corporate Dissolution**

his notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims gainst this corporation as provided in s. 607.1407, F.S.	}
his "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.	
ame of Corporation: Home-King Incorporated	
rate of dissolution will be the date the dissolution is filed with the Department of State or as pecified in the Articles of Dissolution.	
escription of information that must be included in a claim:	
Contact Name, Contact Address, phone number, email address, website,	
Amount due, due date, nature of debt, repayment terms, signed copy of agreen	<u>ie</u> nt.
	_
	<del></del>
lailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)	
Home-King Incorporated	
PO Box 1573	
Cape Canaveral, FL 32920	
claim against the above named corporation will be barred unless a proceeding to enforce the claim is commendithin 4 years after the filing of this notice.	æd
Eileen Olejarski Ellen Alli	
Printed Name of the Person Filing Signature of the Person Filing	

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