

PD3 000116296

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

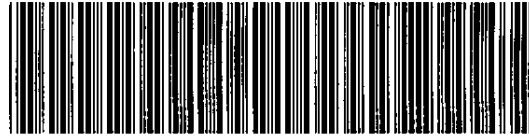
(Business Entity Name)

(Document Number)

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2010 OCT 25 P 12:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Voldis  
Reels  
10-25-10

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Voluntary Dissolution

**DOCUMENT NUMBER:** \_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Nancy Olsen  
(Name of Contact Person)

Screen Rooms by Peter Olsen Inc.  
(Firm/Company)

202 Pelican Dr. NE  
(Address)

Palm Bay FL 32907  
(City/State and Zip Code)

For further information concerning this matter, please call:

Nancy Olsen at 321 722-2127 (home)  
(Name of Contact Person) (Area Code & Daytime Telephone Number)  
321 368-8964 (cell)

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

October 21, 2010

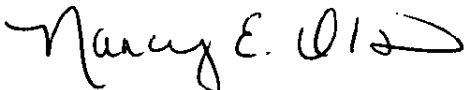
Florida Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee FL 32314

ATT: Themla Lewis

In regard to our telephone conversation on Wednesday, October 20, 2010, I am returning this form signed the way you requested. I hope this will satisfy the requirement to close my deceased husband's corporation, Screen Rooms by Peter Olsen, Inc.

Thank you for all your help and understanding through this difficult time.

Sincerely,



Nancy E. Olsen  
Executor of the Estate

RECEIVED  
10 OCT 25 AM 8:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 15, 2010

NANCY OLSEN  
SCREEN ROOMS BY PETER OLSEN, INC.  
202 PELICAN DRIVE NE  
PALM BAY, FL 32907

SUBJECT: SCREEN ROOMS BY PETER OLSEN, INC.  
Ref. Number: P03000116296

We have received your document for SCREEN ROOMS BY PETER OLSEN, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The acceptable title for the person signing this document is representative, authorized representative, attorney-in-fact and power of attorney. We will also accept the titles underneath the signature line.

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) 245-6905.

Thelma Lewis  
Document Specialist Supervisor

Letter Number: 910A00024474

## 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:

Screen Rooms by Peter Olsen, Inc.

SECOND: The document number of the corporation (if known): P03000116296

THIRD: The file date of the articles of incorporation: 10/20/03

FOURTH: (CHECK AT LEAST ONE BOX)

☒ None of the corporation's shares have been issued.

☐ 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.

Signature: Nancy E. Olsen

(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.)

Nancy Olsen

(Typed or printed name of person signing)

Executor of the Estate

(Title of Person Signing)

FILED  
2010 OCT 25 P 12:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Filing Fee: \$35