

P03000125486

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600030242176

03/22/04--01025--002 **43.75

04 MAR 17 PM 4:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

DISS.

3/22/04

8

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CORPORATE DISSOLUTION

DOCUMENT NUMBER: PO3000125486

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

Please return all correspondence concerning this matter to the following:

MICHAEL A. OLIVIERI
(Name of Person)

OLIVIERI WALLCOVERINGS
(Name of Firm/Company)

1694 LIGHTHOUSE POINTE DRIVE
(Address)

GULF BREEZE, FL, 32563-9095
(City/State/and Zip Code)

For further information concerning this matter, please call:

MICHAELA OLIVIERI at (850) 450-7382
(Name of Person) (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 & Certificate of Status & 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, Florida 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

RECEIVED

04 MAR 10 AM 10:05

DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

March 10, 2004

Michael A. Olivieri
Olivieri Wallcoverings Inc.
1694 Lighthouse Pointe Drive
Gulf Breeze, FL 32563-9095

SUBJECT: OLIVIERI WALLCOVERINGS INC.
Ref. Number: P03000125486

The enclosed paperwork was received in this office for the subject corporation. No articles of dissolution were enclosed, neither was the filing fee for the dissolution. I am enclosing dissolution information.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6901.

Susan Payne
Senior Section Administrator

Letter Number: 604A00016124

RECEIVED
04 MAR 17 AM 9:54
DIVISION OF CORPORATIONS

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 Department of State:

OLIVIERI WALLCOVERINGS, INC.

SECOND: The document number of the corporation (if known): P03000125486

THIRD: The file date of the articles of incorporation was: 04, NOV, 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.

Signed this 15th day of MARCH, 2004.

Signature:

Michael A. Olivieri

(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.)

MICHAEL A. OLIVIERI

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILED
04 MAR 17 PM 14:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA