P03000129591

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	» #)
PICK-UP	WAIT	MAIL
	de la Carlo Maria	
(Bu:	siness Entity Nan	ne)
	,	
(Do	cument Number)	
Certified Copies	Cartificates	of Status
Contined Copies		
Special Instructions to	Filing Officer:	
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Carol J. Foster, Enrolled Agent

Federally Authorized Tax Practitioner

4630 5th Street West SUITES 3 & 4 Bradenton, FL 34207 Phone: (941) 727-5253 FAX: (941) 755-7385

Email: carifoster@aol.com

Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RE: HOMETOWN CRAFTSMEN, INC.

Document # P03000129591

Dear Sir or Madam:

Enclosed please find duly completed Articles of Dissolution for the above-named corporation. Because we are requesting a Certified Copy, I have enclosed an additional copy of these articles as well as a check in the amount of \$43.75.

Please return all correspondence concerning this matter to me at the above address. Thank you for your attention to this matter.

Sincerely,

Carol J. Foster Enrolled Agent

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT:	HOMETOWN CRA	AFTSMEN, INC.	
DOCUMENT N	UMBER:P030001:	29591	Segret Adv. 18
The enclosed Arti	icles of Dissolution and	fee are submitted for	filing.
Please return all c	orrespondence concerni	ng this matter to the fo	ollowing:
	CAROL J. F	OSTER, E.A.	<u> </u>
	(Name of	Person)	
	(Name of	f Firm/Company)	
	4630 5TH STR	EET WEST, SUITES 3	§ 4
		(Address)	
	BRADENTON,	FL 34207	
	(City/	State/and Zip Code)	
For further inform	nation concerning this ma	atter, please call:	
	CAROL J. FOSTER, E.A.	at (941)	727-5253
	(Name of Person)	(Area Code o	& Daytime Telephone Number)
Enclosed is a chec	ck for the following amo	unt:	
□ \$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status		c & 🗆 \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Amendm Division P.O. Box	G ADDRESS: ent Section of Corporations 6327 ee, Florida 32314		STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

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 Department of State:			
	HOMETOWN CRAFTSMEN, INC.			
SECOND:	The document number of the corporation (if known): P03000129591			
THIRD:	The date dissolution was authorized:JUNE 15, 2004			
	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 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			
	(voting group)			
	Signed this 15TH day of JUNE 2004			
	day or volume , 2001			
	10			
Signa	(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)			
	(Typed or printed name of person signing)			
	PRESIDENT			
	(Title of person signing)			

Filing Fee: \$35