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(Re	equestor's Name)	
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PICKELARY OF STATE

TRANSMITTAL LETTER

TO: Amendment Section **Division of Corporations** Sim Smith Carporter Inc SUBJECT: DOCUMENT NUMBER: PO 3000129616 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Firm/Company) Thomas Dr. # 1
(Address) Bch, FL 32408 City/State/and Zip Code) For further information concerning this matter, please call: _at(850) _ 758-3186 (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for the following amount: □\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) STREET ADDRESS: **MAILING ADDRESS:** Amendment Section Amendment Section Division of Corporations Division of Corporations

> 409 E. Gaines Street Tallahassee, Florida 32399

P.O. Box 6327

Tallahassee, Florida 32314

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:		
-	Sm Snith Corporter Inc		
SECOND:	The document number of the corporation (if known): PO 3000139616		
THIRD:	The file date of the articles of incorporation was: 11/6/03		
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: (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) ALVAK JAN 5 ALVAK JAN 5 ALVAK JAN 5 Filing Fee: \$35		
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