

P03000131122

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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less with notice

08/16/05--01004--001 **35.00

FILED
05 AUG 15 PM 4:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
05 AUG 15 PM 4:11
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DR
8/15/05

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION OF CERTIFIED PROFESSIONAL FLOORING, INC.

DOCUMENT NUMBER: PO 3000 131122

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

Please return all correspondence concerning this matter to the following:

TIMOTHY HAIFLEY
(Name of Person)

CERTIFIED PROFESSIONAL FLOORING, INC.
(Name of Firm/Company)

P.O. Box 102
(Address)

ST. MARKS, FL 32355
(City/State/and Zip Code)

For further information concerning this matter, please call:

Tim HAIFLEY at (850) 284-3460
(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 & 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

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FILED
05 AUG 15 PM 4:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation as currently filed with the Florida Department of State:

CERTIFIED PROFESSIONAL FLOORING, INC.

SECOND: The document number of the corporation (if known): P03000131122

THIRD: The file date of the articles of incorporation: 11-12-03

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 15 day of August, 2005.

Signature: [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.)

TIM S. HAILEY
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "*Notice of Corporate Dissolution*" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: CERTIFIED PROFESSIONAL FLOORING, INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:


OFFICER OF CORPORATION WITH WHOM CONTRACT WAS INITIATED
NATURE OF SERVICES AND/OR PRODUCTS IN QUESTION
INTERESTED OFFICER'S AND CLAIMANTS * SIGNATURES WITH BID(S).
(NOTE: ALL CONTRACTS TO BE SIGNED BY MORE THAN 50% OF
SHAREHOLDERS)

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

P.O. Box 102
ST. MARKS, FL 32355

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Tim S. HAIFLEY
Printed Name of the Person Filing


Signature of the Person Filing