

PO3000136377

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

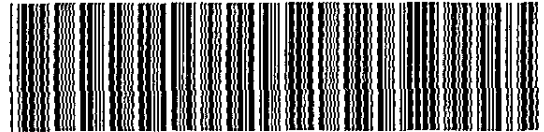
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*dis.*

G. Ouellette DEC 05 2005

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Kimberly D Knight CPA PA

**DOCUMENT NUMBER:** 903000136377

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

Please return all correspondence concerning this matter to the following:

Kimberly D Knight

(Name of Contact Person)

(Firm/Company)

19867 Vintage Trace Circle

(Address)

Ft Myers, FL 33912

(City/State and Zip Code)

For further information concerning this matter, please call:

Kimberly D Knight

(Name of Contact Person)

at ( 239 ) 337-1237

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

<input checked="" type="checkbox"/> \$35 Filing Fee	<input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status	<input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	<input type="checkbox"/> \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
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**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



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

RECEIVED  
05 DEC -5 AM 8:00  
DIVISION OF CORPORATIONS

November 21, 2005

KIMBERLY D. KNIGHT  
19867 VINTAGE TRACE CIRCLE  
FT. MYERS, FL 33912

SUBJECT: KIMBERLY D. KNIGHT, CPA, PA  
Ref. Number: P03000136377

We have received your document for KIMBERLY D. KNIGHT, CPA, PA 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):

You have used the incorrect form for a profit corporation to dissolve. The form you submitted was for a non profit corporation. Please go to the web site at [sunbiz.org](http://sunbiz.org) and download the profit dissolution form and return with this letter for filing.

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) 245-6903.

Cheryl Coulliette  
Document Specialist

Letter Number: 805A00068586

## 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 Florida Department of State  
Kimberly D Knight CPA PA

SECOND: The document number of the corporation (if known): P03000136377

THIRD: The date dissolution was authorized: 11-1-05

Effective date of dissolution if applicable: \_\_\_\_\_  
(no more than 90 days after dissolution file date)

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TALLAHASSEE, FLORIDA

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)

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)

Kimberly D Knight

(Typed or printed name of person signing)

President

(Title of person signing)

**Filing Fee: \$35**