## P04000007004

. (Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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Certified Copies Certificates of Status	—
Special Instructions to Filing Officer:	
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SECRETARY OF STATE
ALL AHASSEE FLORIO

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## **COVER LETTER**

**TO:** Amendment Section

Division of Corporations	•
SUBJECT: CORPORATION DISSOLUTION	
DOCUMENT NUMBER: P0400007004	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
ANTONIO GOMEZ	<u> </u>
(Name of Contact Person)	
TOTAL FLOORS COVERING. CORP	
(Firm/Company)	<del></del>
6702 RUBENS CT	
(Address)	
ORLANDO, FLORIDA 32818 (City/State and Zip Code)	<del></del>
::	
For further information concerning this matter, please call:	
ANTONIO GOMEZ at (407) 470-2340  (Name of Contact Person) (Area Code & Daytime Telepho	
(Name of Contact Person) (Area Code & Daytime Telepho	ne Number)
Enclosed is a check for the following amount:	•
■\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$52.50 Filing Fee & Certificate of Status & Certified Copy & Certified C	tatus &
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  MAILING ADDRESS: Amendment Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	

## 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:
	TOTAL FLOORS COVERING. CORP
SECOND:	The document number of the corporation (if known): P0400007004
ΓHIRD:	The date dissolution was authorized: 04/23/2008
	Effective date of dissolution if applicable: 04/23/2008  (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 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
	ANTONIO GOMEZ & HELEN GOMEZ & A
;	ANTONIO GOMEZ & HELEN GOMEZ  (voting group)  (voting group)  Signature:  (By a director, president or 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)
	ANTONIO GOMEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

Filing Fee: \$35

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## **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: TOTAL FLOORS COVERING. CORP		
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:		
WE ARE DESIRE TO FILE THIS DISSOLUTION DUE TO	OVER	HEA
EXPENSES AND DUE TO THE ECONOMIC OUR SALES GO	ИЙОС	AND
WE ARE UNABLE TO KEEP OUR CORPORATION OPEN	•	
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	,	```
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)		
ANTONIO GOMEZ		
6702 RUBENS CT		
ORLANDO,FL 32818		
	•	.;. '
A claim against the above named corporation will be barred unless a proceeding to enforce the claim	m is comm	enced

**ANTONIO GOMEZ** 

within 4 years after the filing of this notice.

Printed Name of the Person Filing

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00