

PD40000025663

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

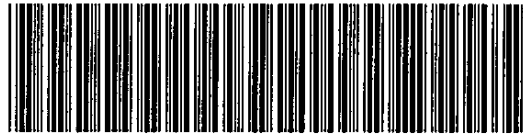
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08 JAN - 8 PM 12:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DISS

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 17, 2007

AMY WILSON
PHIL WILSON DESIGN, INC.
8454 YOUNG AVE NE
ROCKFORD, MI 49341

SUBJECT: PHIL WILSON DESIGN, INC.
Ref. Number: P04000025663

We have received your document for PHIL WILSON DESIGN, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A withdrawal application was submitted in error to dissolve a Florida profit corporation. Please complete the enclosed form and submit 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) 245-6957.

Pamela Smith
Regulatory Specialist II

Letter Number: 007A00070303

RECEIVED
2008 JAN -7 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Phil Wilson Design, Inc.

DOCUMENT NUMBER: P04000025663

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

Please return all correspondence concerning this matter to the following:

Amy Wilson
(Name of Contact Person)

Phil Wilson Design, Inc.
(Firm/Company)

8454 Young Avenue NE
(Address)

Rockford, MI 49341
(City/State and Zip Code)

For further information concerning this matter, please call:

Amy Wilson at (616) 874-5614
(Name of Contact 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)
- (already sent)

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

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:

Phil Wilson Design, Inc.

SECOND: The document number of the corporation (if known): P04 000025663

THIRD: The date dissolution was authorized: 9/15/07

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 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 an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary that fiduciary)

Amy M. Wilson

(Typed or printed name of person signing)

Vice President

(Title of person signing)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 JAN -8 PM 12:42

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Filing Fee: \$35