

P04000033712

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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11/25/09--01016--002 **35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 DEC 14 AM 8:56

FILED

Voldas.

D. CONNEL DEC 21 2009



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 3, 2009

KEVIN SNOCK
2624 CRABAPPLE CIRCLE
BOYNTON BEACH, FL 33436

CONTACT: SUE SNOCK - 561 702 4250

SUBJECT: KMS TOOLS, INC.
Ref. Number: P04000033712

We have received your document 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):

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

WE WILL RETAIN THE REGISTERED AGENT RESIGNATION AND FILE IT AFTER THE DISSOLUTION IS FILED. PLEASE COMPLETE THE DISSOLUTION FORM AND RETURN WITH A CHECK IN THE AMOUNT OF \$35.

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) 245-6906.

Darlene Connell
Regulatory Specialist II

Letter Number: 709A00037061

RECEIVED
DEC 14 AM 8:00
CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: KMS Tools, INC.

DOCUMENT NUMBER: P04000033712

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

Please return all correspondence concerning this matter to the following:

SUSAN SNOCK

(Name of Contact Person)

(Firm/Company)

2624 Crabapple Circle

(Address)

Boynton Beach, FL 33436

(City/State and Zip Code)

For further information concerning this matter, please call:

SUSAN SNOCK

(Name of Contact Person)

at (561) 702-4250

(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, 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:

KMS tools, INC.

SECOND: The document number of the corporation (if known): P040000 33712

THIRD: The date dissolution was authorized: 11/13/09

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

[Signature]
(voting group)

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)

Kevin M. Snock
(Typed or printed name of person signing)

President
(Title of person signing)

Filing Fee: \$35

FILED
00 DEC 14 AM 8:56
SECRETARY OF STATE
TALLAHASSEE FL 32399