

PO40000042207

(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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FILED
06 JAN 10 PM 12:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dissolution w/Notice

T BROWN JAN 17 2006

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SKYWAY IT CORP

DOCUMENT NUMBER: P04000042207

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

Please return all correspondence concerning this matter to the following:

NATALIE SWANEY

(Name of Person)

JH ACCOUNTING SERVICES, INC

(Name of Firm/Company)

5777 BENEVA ROAD SOUTH

(Address)

SARASOTA, FL 34233

(City/State/and Zip Code)

For further information concerning this matter, please call:

NATALIE SWANEY

(Name of Person)

at (941) 923-0964

(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:

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

SKYWAY IT CORP

SECOND: The document number of the corporation (if known): P04000042207

THIRD: The file date the articles of incorporation: 03/05/2004

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 27th day of December, 2005.

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.)

PAUL LOWRANCE

(Typed or printed name of person signing)

DIRECTOR

(Title of person signing)

Filing Fee: \$35

FILED
06 JAN 10 PM 12:10
CLERK OF STATE
TALLAHASSEE, FLORIDA

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: SKYWAY IT 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*.

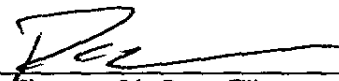
Description of information that must be included in a claim:

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

SKYWAY IT CORP
6732 THE MASTERS AVENUE
BRADENTON, FL 34202

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.

PAUL LOWRANCE
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