

P04000045142

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

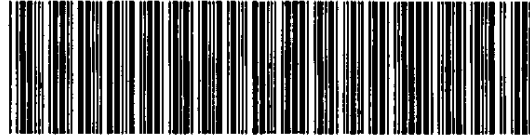
(Document Number)

Certified Copies _____

Certificates of Status ☒

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V/D /w/notice

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9/8/16

16 AUG 16 PM 4:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

BUTZEL LONG

ATTORNEYS AND COUNSELORS

a professional corporation

James C. Bruno
313 225 7024
bruno@butzel.com

Suite 100 150 West Jefferson
Detroit, Michigan 48226
T: 313 225 7000 F: 313 225 7080
butzel.com

August 9, 2016

Florida Department of State
Attn: Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir or Madam:

Re: **Allison U.S.A., Inc. – Articles of Dissolution**


The enclosed Articles of Dissolution and fee in the amount of \$43.75 (for filing fee & Certificate of Status) are submitted for filing.

Please return all correspondence concerning this matter to the following:

James C. Bruno
Butzel Long
150 West Jefferson, Suite 100
Detroit, Michigan 48226

For further information concerning this matter, please call me at the number listed above.

Sincerely,



J.C. Bruno

VIA FIRST CLASS MAIL

JCB/mac
Enclosure
(1734328.1)

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:

Allison U.S.A., Inc.

SECOND: The document number of the corporation (if known): P04000045142

THIRD: The date dissolution was authorized: August 1, 2016

Effective date of dissolution if applicable: _____

(no more than 90 days after dissolution file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

JACOPO ROMANO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

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TALLAHASSEE, FLORIDA

Filing Fee: \$35

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: Allison U.S.A., Inc.

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:

(a) Name of Claimant.

(b) Claimant's address and phone number.

(c) Date of facts on which claim is based.

(d) Dates Claimant becomes aware of each fact on which claim is based.

(e) Amount of claim.

(f) Dates and contents of documents supporting claims.

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

Corporation Services Company

1201 Hays Street

Tallahassee, Florida 32301

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TALLAHASSEE, FLORIDA

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.

JACOPO ROMANO

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