# P0400095434

Janet L. Furling  5 Essey Drive  Ormand Beach, Fu  32176						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:	$\neg$					
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73 /2/17/04 DISS/W NOTICE



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 11, 2004

JANET L FURLINI 5 ESSEX DRIVE ORMOND BEACH, FL 32176

SUBJECT: COASTAL FINANCIAL SOLUTIONS INCORPORATED

Ref. Number: P04000095434

We have received your document for COASTAL FINANCIAL SOLUTIONS INCORPORATED and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(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.

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.

Letter Number: 704A00049730

Pamela Smith Document Specialist

#### TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations						
SUBJECT: Coastal Financial Solutions						
DOCUMENT NUMBER: P04000095434						
The enclosed Articles of Dissolution and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Janet L. Guruni (Name of Person)						
(Name of Person)						
Coastal Knancial Solutions						
(Name of Firm/Company)						
5 Essex Drive						
(Address)						
DRMONT Beach, & 32176						
(City/State/and Zip Code)						
For further information concerning this matter, please call:						
Int L. Furtine at (386) 206-9639 (Area Code & Daytime Telephone Number)						
Enclosed is a check for the following amount:						
\$35 Filing Fee Sertificate of Status Certificate of Status (Additional copy is enclosed)  \$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:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, Florida 32314Tallahassee, Florida 32399						

## 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 Department of State: The document number of the corporation (if known): VSECOND: The date dissolution was authorized: THIRD: Effective date of dissolution if applicable: (no more than 90 days after dissolution file date) Adoption of Dissolution (CHECK ONE) FOURTH: Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval. Dissolution was approved by of 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: (By a dire 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)

Filing Fee: \$35

(Title of person signing)

(Typed or printed name of person signing)

### **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		<del>-</del>	_ ,	
Name of Corporation:	Coastal	Financia	l Solutions	s.Incorpo
Date of dissolution will be specified in the Articles of		on is filed with the D	epartment of State or as	·
Description of information	n that must be include	d in a claim:		
B				
120				
				- · · · · · · · · · · · · · · · · · · ·
Mailing address where cla	ims can be sent: (Clai	ims cannot be sent to	the Division of Corporation	ons)
	14 Squa	u Cou	rt,	
	Palm Cox	est FL	22164	
		,		
A claim against the above is commenced within 4 ye			proceeding to enforce the	claim
			- 4 -	
Janet 1	Gurlin	) (	and Lo	inlui
Printed Name	of the Person Filing		Signature of the Person Fi	ing

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