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SECRETARY OF STATE

18/14

COVER LETTER TO: 'Amendment Section Division of Corporations ARTICLES OF DISSOLUTION DOCUMENT NUMBER: PO 4 000 1 30921 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Genold M. Lewis (Name of Contact Person) Hallywood, FL 33020 (City/State and Zip Code) For further information concerning this matter, please call: Enclosed is a check for the following amount: \$35 Filing Fee \$\$43.75 Filing Fee & \$\sum \$\$43.75 Filing Fee & \$\sum \$\$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status Certificate of Status & (Additional copy is Certified Copy

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

enclosed)

(Additional copy is

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:
	GTECH CABLE, INC.
SECOND:	The document number of the corporation (if known): P04 000130921
THIRD:	The file date the articles of incorporation: 09-20-2004
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.
Sign	ature: (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.)
	Cepold M. Lewis (Typed or printed name of person signing)
	PRESIDENT (Title of Person Signing)

Filing Fee: \$35