(Re	equestor's Name)	<del></del>	
(Ac	ldress)		
(Ac	ldress)		
(City/State/Zip/Phone #)			
PICK-UP	WAIT	MAIL	
(Bu	ısiness Entity Nar	ne)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



700287673937

07/08/16--01005--002 \*\*35.00

JUL 12 2016 R. WHITE

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: R.B. Striping Inc
DOCUMENT NUMBER: P04000161464
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Lidia Becerra (Name of Contact Person)
(Name of Contact Person)
R.B. Striping Inc (Firm/Company)
(Firm/Company)
5128 Kempston Dr (Address)
(Address)
Octardo FL 32812
(City/State and Zip Code)
For further information concerning this matter, please call:
Lidia Becerra at (427-579-4505
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed)  \$35 Filing Fee & \$\Bigcup \\$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:				
	R.B. Striping Inc		_		
SECOND:	The document number of the corporation (if known): POH 000 161 464				
THIRD:	The date dissolution was authorized: 7/6/2016				
	Effective date of dissolution if applicable: 7/6/2016  (no more than 90 days after dissolution Note: If the date inserted in this block does not meet the applicable statutory filing requirement be listed as the document's effective date on the Department of State's records.	on file date) ements, this date	- will		
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes cas was sufficient for approval.	t for dissolution	on		
	☐ Dissolution was approved by the shareholders through voting groups.				
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled			
	The number of votes cast for dissolution was sufficient for approval by	JUL -8 PH	Characters		
	(voting group)	7.			
	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)		-		
	(Typed or printed name of person signing)		-		
	(Title of parcen similar)		_		