P0500013482

(Requestor's Name)		
(Address)		
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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SECRETARY OF STATE
SECRETARY OF

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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: OUTOFSIGHT BUSINESS REPAIR, INC.			
DOCUMENT NUMBER: P05000013482			
The enclosed Articles of Dissolution and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
MICHAEL B. HARRISON			
OUTOFSIGHT BUSINESS REPAIR, INC.			
(Name of Firm/Company)			
19046 Bruce B. Downs Blvd. #232			
(Address)			
Tampa, FL 33647			
(City/State/and Zip Code)			
For further information concerning this matter, please call:			
Michael B. Harrison at (813) 817-1849			
(Name of Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:			
Certificate of Status (\$43.75 Filing Fee &\$52.50 Filing Fee, Certified Copy		
MAILING ADDRESS:	STREET ADDRESS:		
Amendment Section Division of Corporations	Amendment Section Division of Corporations		
P.O. Box 6327	409 E. Gaines Street		
Tallahassee, Florida 32314	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 outofsight furniture repair, inc.	nt of State:
SECOND:	The document number of the corporation (if known): P050000134	482
THIRD:	The file date the articles of incorporation: 01/26/2005	
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 disto the shareholders, if shares were issued.	tributed
SEVENTH:	Adoption of Dissolution (CHECK ONE)	05 JI SECI
	A majority of the incorporators authorized the dissolution.	UN 13
	A majority of the directors authorized the dissolution.	JUN 13 PM 2: 48 CRETARY OF STAT LAHASSEE, FLORI
Si	gned this 9TH day of JULY , 2005	2: 48 STATE LORIEN
Sion	ature: Markael Blann	
2.5	(By a director, president or other officer - if directors or officers have not been selected, by an in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	incorporator - if
	MICHAEL B. HARRISON (Typed or printed name of person signing)	
	DIRECTOR & PRESIDENT (Title of person signing)	

Filing Fee: \$35