

PO5000082784

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

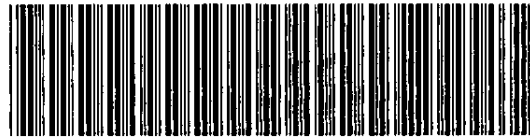
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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VD / Amy

FILED
11 APR 20 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

tk 4-20-11



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 13, 2011

VINCENT J. CIRRINCIONE II
C/O DANIEL J. CIRRINCIONE
4528 BRIDGE WATER DR
ORLANDO, FL 32817

SUBJECT: MAJESTIC INSTALLERS, INC.
Ref. Number: P05000082784

We have received your document for MAJESTIC INSTALLERS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

Correct filed date of incorporation.

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 311A00009038

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MAJESTIC INSTALLERS INC

DOCUMENT NUMBER: P05000082784

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

VINCENT J CIRRINCIONE TL
(Name of Contact Person)

% Daniel J Cirrincione
(Firm/Company)

4528 Bridgewater Dr
(Address)

Orlando FL 32817
(City/State and Zip Code)

For further information concerning this matter, please call:

_____ at (_____) _____
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$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:
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

FILED
11 APR 20 PM 1:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

MAJESTIC INSTALLERS, INC.

SECOND: The document number of the corporation (if known): P05000082784

THIRD: The file date of the articles of incorporation: 6/9/05

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.

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.)

VINCENT J. CIRRINCIONE II
(Typed or printed name of person signing)

President
(Title of Person Signing)

Filing Fee: \$35