P05000101339

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10-14

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Dissolution of.	ri-County Decking Inc
DOCUMENT NUMBER: P0500	0101339
The enclosed Articles of Dissolution and fee a	are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
Juliè	Martel
(Name of Cor	ntact Person)
Alan M S	Stein Accounting
3930 SR 64 Ed	ist
Bradenton, FL (City/State a	34208
(City/State a	nd Zip Code)
For further information concerning this matter	, please call:
(Name of Contact Person)	at (941) 749-5364 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
	\$43.75 Filing Fee & \$\sum \$52.50 Filing Fee, Certified Copy Certificate of Status & Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building
Tallahassee, FL 32314	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:		
	Tri-County Decking, Inc.		
SECOND:	The document number of the corporation (if known): P0500010132		
THIRD:	The date dissolution was authorized: 10/03/05		
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)		
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	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		
	(voting group)		
Signature: (By a discor, 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)		
	Tresident (Title of person signing)		

Filing Fee: \$35