## P05000121412

(Re	questor's Name)	
(Ad	dress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	MAM	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRE DARY OF STATE
TALLAHASSES, FLORIDA

EFFECTIVE DATE
12/31/20151

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

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SUBJECT: NEW TIMES CARPENTRY, IN	IC.
DOCUMENT NUMBER: P0500012141	2
The enclosed Articles of Dissolution an	nd fee are submitted for filing.
Please return all correspondence concern	ning this matter to the following:
PAULINO DE AMORIM	
(Name	of Contact Person)
NEW TIMES CARPENTRY, INC.	
(F	Firm/Company)
5075 45TH AVE N	
300 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	(Address)
ST PETERSBURG, FL 33709-5523	
(City/	State and Zip Code)
For further information concerning this	matter, please call:
PAULINO DE AMORIM	at ((727)522-0810
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following an	nount:
□ \$35 Filing Fee □ \$43.75 Filing Fee Certificate of Statu	
MAILING ADDRESS: Amendment Section	STREET ADDRESS: Amendment Section

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building





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:  NEW TIMES CARPENTRY, INC.		
SECOND:	The document number of the corporation (if known):		
THIRD:	The date dissolution was authorized:		
	Effective date of dissolution if applicable: 12/31/2015		
	(no more than 90 days after dissolution file date)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.		
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 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 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)		
	PAULINO DE AMORIM		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)		

## Filing Fee: \$35

## **Notice of Corporate Dissolution**

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation:\_\_\_NEW TIMES CARPENTRY, INC. Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: - claimant's name and address - acceptable proof to validate the claim (this may include dated invoice, dated billing statement, or executed agreement) Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) PAULINO DE AMORM, 5075 45TH AVE N, ST PETERSBURG FL 33709-5523 A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00

Signature of the Person Filing

PAULINO DE AMORIM

Printed Name of the Person Filing