

PD5000127656

(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



500106726945

07/27/07--01012--016 **35.00

FILED

07 JUL 27 AM 9:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Diss/notice

38

DiEdwardo & Zimmer Inc

236 Castlewood Drive Unit 206
North Palm Beach, FL 33408

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Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

July 31, 2007

RE: DiEdwardo & Zimmer Inc (P05000127656)

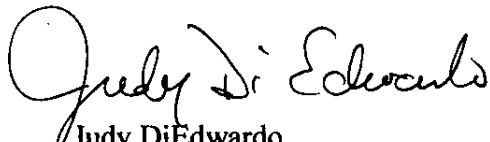
Dear Sir or Madam:

Enclosed please find the Articles of Dissolution for the above named entity. A check in the amount of \$35.00 is enclosed.

This represents the cost of the Filing Fees for dissolution & withdrawal for the above named entity.

We appreciate your cooperation in this matter. If we can provide any additional information or be of any further assistance, please do not hesitate to contact us.

Sincerely,


Judy DiEdwardo
Vice-President

Enclosures

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

DIEDWARDO & ZIMMER INC

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

P05000127656

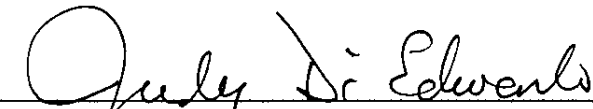
THIRD: The date dissolution was authorized:

July 31, 2007

FOURTH: Adoption of Dissolution

**Dissolution was approved by the shareholders.
The number of votes cast for dissolution was sufficient for approval.**

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)

Judy DiEdwardo

(Typed name of person signing)

Vice 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: **DIEDWARDO & ZIMMER 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:

Specific nature of claim and description of events surrounding claim
Mailing Address and Telephone Number

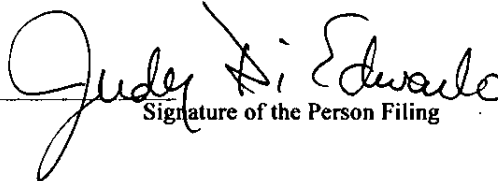
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

DiEdwardo & Zimmer Inc
c/o Michael J McGoey CPA Inc
639 East Ocean Ave, Suite 101
Boynton Beach, FL 33435

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.

Judy DiEdwardo

Typed name of person signing

A handwritten signature in cursive script that reads "Judy DiEdwardo". The signature is written in dark ink and is positioned to the right of the typed name.

Signature of the Person Filing