P05000138678

(Requestor's Name)			
(Address)			
(Address)			
(Addiess)			
(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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O6 NOV 13 PH IO: IN
SECRETARY OF STATE
TALLAHASSEE, FLORIO.

4117

COVER LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: Dissolution of Corporation
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Joseph F. Renky (Name of Contact Person)
ARROW CONSTRUCTION PAINTING INC. (Firm/Company)
4442 ANVERS BLUD (Address)
4442 ANVERS BLVB (Address) TACKSONVILLE, FL. 32210 (City/State and Zip Code)
For further information concerning this matter, please call:
Tosph + Denny at (504) 778-4208 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
Stiling Fee \$\times \text{\$\frac{1}{2}\$} \$\fr
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

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 Departmen	nt of State:
	ARROW Construction Printing Inc .	— ·· · · · ·
SECOND:	The document number of the corporation (if known): P05000	384 18
THIRD:	The file date of the articles of incorporation: Det & 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 dis to the shareholders, if shares were issued.	tributed .
SEVENTH:	Adoption of Dissolution (CHECK ONE)	SECTIVALLY
	A majority of the incorporators authorized the dissolution.	NOV 1
	A majority of the directors authorized the dissolution.	ED 3 PN 10-16 Y OF STATE SEE, FLORIDA
Sign	ature: (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
	Tasph F. DERY (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.

Date of dissolution will be the date the dissolution is filed with the Department of State or as

Name of Corporation: ARLOW Coust Ruction

Description of information that must be included in a claim:

specified in the Articles of Dissolution.

within 4 years after the filing of this notice.

OP ATONE		
1.) CENTIFIED COPY OF SIGNED CONTAINT		
1.) CENTIFIED COPY OF SIGNED CONTAINT 2.) DATE AND PLACE OF SERVICE.		
3.) CERTIFIED COPY OF COMPLETETION		
3.) CERTIFIED COPY OF COMPLETETION 4.) NAME OF PERSON ON COMPANY		
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) SEE FLORY 4442 ANUELS BLVD. JAX., FZ. 32210	06 NOV 13 PH 10: 1	FILED
	9	

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

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced