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SECRETARY OF STATE
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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations SUBJECT: Notice of Corporate Dissolution DOCUMENT NUMBER: P05000146794 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Robert P Swain (Name of Contact Person) Robert Swain, Inc. (Firm/Company) 4953 W Southern St (Address) Lecanto, FL 34461 (City/State and Zip Code) For further information concerning this matter, please call: Robert P Swain (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: ✓\$35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee, Certificate of Status Certificate of Status & Certified Copy (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) **MAILING ADDRESS: STREET ADDRESS: Amendment Section** Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building

2661 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	f the corporation as currently filed with the Florida Departme	ent of State:
	Robert	Swain, Inc.	
SECOND:	The docume	ent number of the corporation (if known): P0500014679	94
THIRD:		e of the articles of incorporation: 11/02/2005	8 APR
FOURTH:	(CHECK A	T LEAST ONE BOX)	-2 TARY ASSE
	✓ No	one of the corporation's shares have been issued.	08 APR -2 PH 1:5
	Th	ne corporation has not commenced business.	ATE RIDE
FIFTH:	No debt of th	ne corporation remains unpaid.	
SIXTH:		s of the corporation remaining after winding up have been di olders, if shares were issued.	stributed
SEVENTH:	Adoption	of Dissolution (CHECK ONE)	
	✓ A	majority of the incorporators authorized the dissolution.	
	□ A	majority of the directors authorized the dissolution.	
			١
Sign		or, president or other officer - if directors or officers have not been selected, by a s of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	an incorporator - if
	<u> </u>	Robert P Swain	
		(Typed or printed name of person signing)	
	<u> </u>	President	
		(Title of Person Signing)	

Filing Fee: \$35