(Req	uestor's Name)	
(Add	ress)	
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(City,	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nam	ne)
(Document Number)		
Certified Copies	Certificates	of Status
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SECRETARY OF STATE

6200

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Articles of Dissolution to	dissolve a Florida profit corporation		
DOCUMENT NUMBER: P06000020	16		
The enclosed Articles of Dissolution and fee a	are submitted for filing.		
Please return all correspondence concerning th	is matter to the following:		
Melissa Lear			
(Name of Cor	ntact Person)		
Ohana Custom Homes, Inc.			
(Firm/Company)			
PO Box 151609			
(Address)			
Cape Coral, FL 33915			
(City/State a	nd Zip Code)		
For further information concerning this matter	please call:		
Melissa Lear	_at (_239)		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:			
	\$43.75 Filing Fee & \$\subseteq\$ \$\\$52.50 Filing Fee, Certified Copy Additional copy is enclosed) Certified Copy (Additional copy is enclosed)		
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301



April 13, 2009

MELISSA LEAR OHANA CUSTOM HOMES, INC. P.O. BOX 151609 CAPE CORAL, FL 33915

SUBJECT: OHANA CUSTOM HOMES, INC.

Ref. Number: P06000002016

We have received your document for OHANA CUSTOM HOMES, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 209A00012329

CCVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Articles of Dissolution to dissolve a Florida profit corporation				
DOCUMENT NUMBER: P06000002016				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning	this matter to the following:			
Meliana Laar				
Melissa Lear				
(Name of C	Contact Person)			
Ohana Custom Homes, Inc.				
(Firm/Company)				
PO Box 151609				
(Address)				
Cape Coral, FL 33915	44-14-70-70			
(City/Stat	te and Zip Code)			
For further information concerning this mat	ter, please call:			
Melissa Lear	at (239) 218-7052			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount	nt:			
\$35 Filing Fee \$\bigs\\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & ✓\$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)			
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations 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:	IRST: The name of the corporation as currently filed with the Florida Department of State:		
	OHANA CUSTOM HOMES, INC.		
SECOND:	The document number of the corporation (if known): P0600002016		
THIRD:	The file date of the articles of incorporation: 01/05/2006		
FOURTH:	(CHECK AT LEAST ONE BOX)	FA:	
	None of the corporation's shares have been issued.	ECRETAL LAHA	
	The corporation has not commenced business.	ARY O	
FIFTH:	No debt of the corporation remains unpaid.	F STV	
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	RIDA	
SEVENTH:	Adoption of Dissolution (CHECK ONE)		
	A majority of the incorporators authorized the dissolution.		
	A majority of the directors authorized the dissolution.		
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.)			
	Melissa Lear		
(Typed or printed name of person signing)			
	Vice President		
	(Title of Person Signing)		

Filing Fee: \$35

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FILED