

PO6000017943

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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 MAY -5 AM 10:33

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diss
G. Goulette MAY 09 2008

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution

DOCUMENT NUMBER: 900065179419

The enclosed Articles of Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Melvena Clarke
(Name of Contact Person)

VALIANT II ASSOCIATES INC
(Firm/Company)
4831 NW 19 CT
Lauderhill, FL 33313

(Firm/Company)

(Firm/Company)

(Firm/Company) at (954) 731-5527

☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy ☐ \$52.50 Filing Fee, Certificate of Status & (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
666 N. G St.
Tallahassee, FL 32314

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 Department of State:

VALIANT TL ASSOCIATES INC

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

P06000017943

THIRD: The file date of the articles of incorporation:

2-3-06

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 distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

☐ A majority of the incorporators authorized the dissolution.

☒ A majority of the directors authorized the dissolution.

Signature:

Melvena Clarke

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Melvena Clarke

(Typed or printed name of person signing)

P/D

(Title of Person Signing)

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Filing Fee: \$35