

P060000048259

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

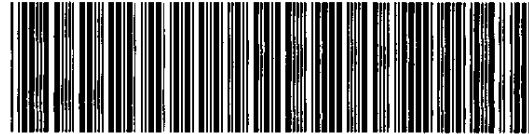
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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VD/Annot

FILED
10 OCT 29 AM 11:24
SECRETARY OF STATE
ALABAMA

Roberts OCT 29 2010

10-25-2010

Dear Ms. Roberts,

I did not know what date to put for dissolution.

My husband passed away very suddenly on December 5, 2007. He had just started a large project which two of our sons came here from Texas to help me finish. We finished the job on June or July of 2008. Without my husband I had no desire to continue the business.

So it could either be the date he passed away or the date the job ended. Now thinking about it - if two people have a corp. and one dies it seems like that would end the corp - I'm not sure so I will put that date.

Thank you

Joan Paul

405 Bay Pt Ave

Nokomis, FL 34275

(407) 590-2009 cell

Joan.paul@hotmail.com



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 13, 2010

JOAN PAULL
FIRST CHOICE BUILDERS
405 BAY POINT AVE
NOKOMIS, FL 34275

SUBJECT: FIRST CHOICE BUILDERS, CORP
Ref. Number: P06000048259

We have received your document for FIRST CHOICE BUILDERS, CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the date the dissolution was authorized.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 510A00021744

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Corp.

DOCUMENT NUMBER: P06000048259

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

Please return all correspondence concerning this matter to the following:

Joan Paul

(Name of Contact Person)

First Choice Builders

(Firm/Company)

405 Bay Point Ave

(Address)

Mokomis, FL 34275

(City/State and Zip Code)

For further information concerning this matter, please call:

Joan Paul

(Name of Contact Person)

at (407) 590-2009

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & 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 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FILED
10 OCT 29 AM 11:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation as currently filed with the Florida Department of State:

First Choice Builders Corp

SECOND: The document number of the corporation (if known): P06000048259

THIRD: The date dissolution was authorized: 12-5-07

Effective date of dissolution if applicable: 8-31-10
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

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

☐ Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

Joan Paull (other person is deceased)
(voting group)

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)

Joan Paull
(Typed or printed name of person signing)

VP
(Title of person signing)

Filing Fee: \$35