

P06000055408

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

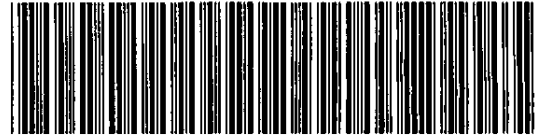
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/24/12--01032--013 **25.00

03/19/12--01008--016 **10.00

FILED
12 MAR 19 PM 2:34
SECURITY OF STATE
TALLAHASSEE, FLORIDA

VOL DS
KRCB ~~wrong form~~
3/23



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 29, 2012

MARC BRINKMAN
BRIDLES & BITS
9280 SE MYSTIC COVE TERRACE
HOBE SOUND, FL 33455

SUBJECT: BRIDLES & BITS, INC.
Ref. Number: P06000055408

*Thank You For
Correction!*

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

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Karen Gibson
Document Specialist Supervisor

Letter Number: 712A00008198

RECEIVED

12 MAR 16 AM 9:28

DOCK BRIDLE & BITS, INC.
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Bridles + Bits, Inc.

DOCUMENT NUMBER: P06000055408

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

Please return all correspondence concerning this matter to the following:

Marc Brinkman
(Name of Contact Person)

Bridles + Bits, Inc.
(Firm/Company)

9280 SE Mystic Cove Terrace, Hohe Sound
(Address)

Hohe Sound, FL 33455
(City/State and Zip Code)

For further information concerning this matter, please call:

Marc Brinkman at (772) 486-5841
(Name of Contact Person) (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:

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

Birdley + Bits, Inc.

SECOND: The document number of the corporation (if known): P06000055408

THIRD: The date dissolution was authorized: 03-01-2012

Effective date of dissolution if applicable: _____
(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

(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)

Marc J. Brinkman

(Typed or printed name of person signing)

Vice President

(Title of person signing)

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$35