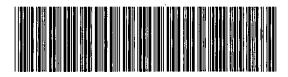
70600065116

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status _ · _ ·
Special Instructions to F	iling Officer:	
·		
	•	

Office Use Only

6 qui



900156472429

06/08/09--01010--005 **35.00

SECRETARY OF STATE

COVER LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: VOLUNTARY DISSOLUTION
DOCUMENT NUMBER: P06000065116
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ROBERT KELLY (Name of Contact Person)
(Name of Contact Person)
STORM PROTECTURS, INC. (Firm/Company)
(Firm/Company)
(Address)
(Address)
WILTON MANORS FL 33305 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
ROBERT KELLY at (954) 568 - 4910 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Ferson) (Nica Code & Daytine Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigsquare \\$43.75 Filing Fee & \$\bigsquare \\$43.75 Filing Fee & \$\bigsquare \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: STREET ADDRESS:
Amendment Section Amendment Section
Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 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:		
	STORM PROTECTORS, INC		
SECOND:	The document number of the corporation (if known): $10600060000000000000000000000000000000$		
THIRD:	The date dissolution was authorized: $4/28/09$		
	Effective date of dissolution if applicable: $4/28/2009$ (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 LARLY RECRETATION OF THE PROPERTY OF T		
	ROBERT P. HEWY SSET		
	(voting group) (voting group) FOR SHATE ARIDA		
	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)		
	(Typed or printed name of person signing)		
	(-) kon or konner mene or konsen al k um a)		
	(Title of person signing)		

Filing Fee: \$35