## P06000069913

(Re	equestor's Name)	
(Ad	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		
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Office Use Only



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DISS. W/ Notice
Brown 5-13-11

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

SUBJECT: Notice of Corporate Dissolution
DOCUMENT NUMBER: P06000069913
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Carolyn F. Coleman
(Name of Contact Person)
KAC3, Inc.
(Firm/Company)
211 S Hampton Ct
(Address)
Niceville FL 32578
(City/State and Zip Code)
For further information concerning this matter, please call:
Andrew J. Coleman at ( 850 ) 582-3244
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□\$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee,  Certificate of Status Certified Copy  (Additional copy is enclosed)  Certificate of Status & Certified Copy  (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section  STREET ADDRESS: Amendment Section

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

## 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:			
	KAC3 Inc.			
SECOND:	The document number of the corporation (if known): P06000069913			
THIRD:	The date dissolution was authorized: 29 April 2011			
	Effective date of dissolution if applicable: 30 April 2011  (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			
	T. 2			
	(voting group)			
	HASSI			
	Signature:  (By a director, president or other officer - if directors or officers have not been selected, been selected)			
	an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)			
	Carolyn F. Coleman			
	(Typed or printed name of person signing)			
	Secretary			
	(Title of person signing)			

Filing Fee: \$35

## **Notice of Corporate Dissolution**

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: KAC3 Inc.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.
Description of information that must be included in a claim:
Reason and amount for claim
Proof that claim was received by an officer of the corporation
Date service was provided
Copy of service provided with corporate signatures
Documented proof that corporation did not attempt to resolve dispute
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commence within 4 years after the filing of this notice.
Carolyn F. Coleman arulyn of Caleman
Printed Name of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00