

PO60000915166

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(Address)

(City/State/Zip/Phone #)

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DIVISION OF CORPORATIONS
2007 NOV 14 AM 9:56

Ps 11/15/07
DISS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ALL-Thrive Vending (S-Corp.)
DOCUMENT NUMBER: PO6 00000 95166

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

Please return all correspondence concerning this matter to the following:

Antoine L. LaFontant
(Name of Contact Person)

ALL-Thrive Vending
(Firm/Company)

105 Long Leaf Pine Circle
(Address)

Sanford, Fl. 32773
(City/State and Zip Code)

For further information concerning this matter, please call:

Antoine LaFontant at (407) 221-1318
(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

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: All-Thrive Lending Inc.

DOCUMENT NUMBER: PO6-000095166

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

Please return all correspondence concerning this matter to the following:

Antoine L. LaFontant
(Name of Contact Person)

All-Thrive Lending Inc.
(Firm/Company)

105 Long Leaf Pine Circle
(Address)

Sanford, FL 32773
(City/State and Zip Code)

For further information concerning this matter, please call:

Antoine LaFontant at (407) 221-1388
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount: (Check was mailed with first letter)

- ☐ \$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

RECEIVED

2007 NOV 14 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2007 NOV 14 AM 9:56

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:

ALL- Thrive Vending Inc

SECOND: The document number of the corporation (if known): PO6-000095166

THIRD: The file date of the articles of incorporation: PO6000095166

FOURTH: (CHECK AT LEAST ONE BOX)

☒ None of the corporation's shares have been issued.

☐ The corporation has not commenced business.

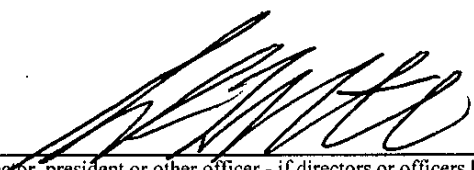
FIFTH: No debt of the corporation remains unpaid.

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: 

(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.)

Antoine LaFontant
(Typed or printed name of person signing)

Owner

(Title of Person Signing)

Filing Fee: \$35