

PO6000103772

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

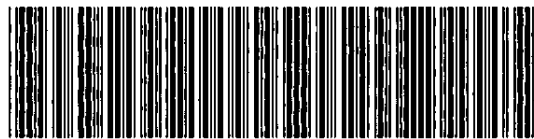
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
10 MAY 20 PM 1:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Valid is.*

D. CONNELL MAY 20 2010



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 7, 2010

EZEQUIEL ORTIZ  
STORM SMART INDUSTRIES, INC.  
6182 IDLEWILD ST.  
FT. MYERS, FL 33966

SUBJECT: BR COLLECTION CORP.  
Ref. Number: P06000103772

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

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) 245-6906.

Darlene Connell  
Regulatory Specialist II

Letter Number: 010A00011465

RECEIVED

2010 MAY 20 AM 8:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** BR COLLECTION CORP.

**DOCUMENT NUMBER:** P06000103772

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

Please return all correspondence concerning this matter to the following:

EZEQUIEL ORTIZ

(Name of Contact Person)

STORM SMART INDUSTRIES, INC.

(Firm/Company)

6182 IDLEWILD STREET

(Address)

FORT MYERS, FL 33966

(City/State and Zip Code)

For further information concerning this matter, please call:

EZEQUIEL ORTIZ

(Name of Contact Person)

at ( 239 ) 462-8889

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>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 607.1401, 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:

BR COLLECTION CORP.

SECOND: The document number of the corporation (if known): P06000103772

THIRD: The file date of the articles of incorporation: 8/8/2006

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.)

**BRIAN RIST**

(Typed or printed name of person signing)

**PRESIDENT**

(Title of Person Signing)

FILED  
10 MAY 20 PM 1:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Filing Fee: \$35