

# P06000/06326

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

(Document Number)

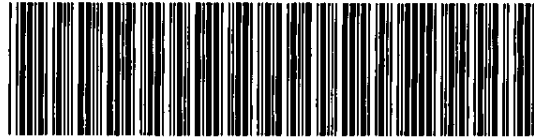
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2008 JAN 24 AM 8:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Theris  
1/25/08*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DWN + Associates, P.A.

**DOCUMENT NUMBER:** P06000106326

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

Please return all correspondence concerning this matter to the following:

David W. Nilsen

(Name of Contact Person)

DWN + Associates, P.A.

(Firm/Company)

12704 Charity Hill Ct

(Address)

Riverview FL 33569

(City/State and Zip Code)

For further information concerning this matter, please call:

David W. Nilsen

(Name of Contact Person)

at ( 813 ) 841-9092

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 14, 2008

DAVID W. NILSEN  
DWN & ASSOCIATES, P.A.  
12704 CHARITY HILL COURT  
RIVERVIEW, FL 33569

SUBJECT: DWN & ASSOCIATES, P.A.  
Ref. Number: P06000106326

We have received your document for DWN & ASSOCIATES, P.A. and your check(s) totaling \$30.00. 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 \$13.75 is due.

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) 245-6905.

Thelma Lewis  
Document Specialist Supervisor

Letter Number: 008A00002748

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2008 JAN 24 AM 8:00

RECEIVED

## 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:

DWN + Associates, P.A.

SECOND: The document number of the corporation (if known): P 06 000 106 326

THIRD: The file date of the articles of incorporation: 8/14/06

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.)

DAVID W NILSEN

(Typed or printed name of person signing)

MANAGER/OWNER

(Title of Person Signing)

FILED  
2008 JAN 24 AM 8:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: DWN + Associates, P.A.

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:

There are no members remaining of this business; All known debts, obligations,  
and liabilities have been paid or discharged; There are no suits pending  
against the company in any court.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

12704 Charity Hill CT  
Riverview FL 33569

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

DAVID W NILSEN

Printed Name of the Person Filing

David W Nilsen

Signature of the Person Filing

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