

PO60000140941

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

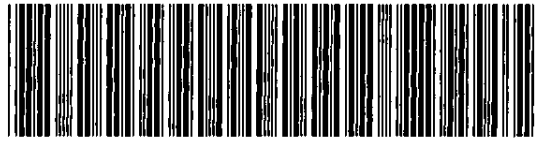
(Document Number)

Certified Copies _____

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08 APR -7 PM 4:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Roberts



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2008 APR -7 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

February 7, 2008

NANCY PAVON
3704 S W 14 STREET
FORT LAUDERDALE, FL 33312

SUBJECT: PAVON CONSTRUCTION INC.
Ref. Number: P06000140941

We have received your document for PAVON CONSTRUCTION INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 908A00008209

JANUARY 30,2008.

To: Department of State.
Division of Corporations.
P.O. Box 6327.
Tallahassee. fl. 32314.

From: PAVON CONSTRUCTION INC.
NANCY PAVON.

Re: Corporation Closing.

I, NANCY PAVON President of the **PAVON CONSTRUCTION INC.**

want to close the corporation.

The information of the corporation is the following:

PAVON CONSTRUCTION INC.

Document Number: P06000140941.

3704 SW 14 th ST.

FORT LAUDERDALE FL. 33312

Tank you.

+ Nancy Pavon
NANCY PAVON.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PAVON CONSTRUCTION INC.

DOCUMENT NUMBER: P06000140941

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

Please return all correspondence concerning this matter to the following:

NANCY PAVON

(Name of Contact Person)

(Firm/Company)

3704 S.W. 14 STREET

(Address)

FORT LAUDERDALE FL 33312

(City/State and Zip Code)

For further information concerning this matter, please call:

NANCY PAVON

(Name of Contact Person)

at (954) 865 6012

(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

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:

PAVON CONSTRUCTION INC.

SECOND: The document number of the corporation (if known): P06000140941

THIRD: The file date of the articles of incorporation: 11-7-06

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: Nancy Pavon

(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.)

NANCY PAVON

(Typed or printed name of person signing)

PRESIDENT

(Title of Person Signing)

Filing Fee: \$35

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA