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TAXPLACE CORP (((H07000069972 3)))

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: HB LAMINATES & FLOORING, CORP.

DOCUMENT NUMBER: <u>P0600014301</u>3

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

Please return all correspondence concerning this matter to the following:

Claudio Ribeiro						
(Name of Person)	-					
Taxplace Corp.	• •,					
(Name of Firm/Company)	-					
2721 S. US 1 Suite 9						
(Address)	•					
Fort Pierce, FL 34982						
(City/State/and Zip Code)	•					
For further information concerning this matter, please call:	- ,					
Claudio Ribeiroat (772) 460-1000						
(Name of Person) (Area Code & Daytime Telephone Nu	nber)					
Enclosed is a check for the following amount:						
✓\$35 Filing Fee ↓\$43.75 Filing Fee & ↓\$43.75 Filing Fee & ↓\$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is enclosed) (Additional copy is enclosed)	:					
MAILING ADDRESS: Amendment SectionSTREET ADDRESS: Amendment SectionDivision of Corporations P.O. Box 6327Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32314Tallahassee, Florida 32314Tallahassee, Florida 32399						

772-402-4520-88

TAXPLACE CORP

MAR 16

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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 S	State:
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HB LAMINATES & FLOORING, CORP.

SECOND: The document number of the corporation (if known): P06000143013

THIRD: The file date the articles of incorporation: <u>11/14/2006</u>

FOURTH: (CHECK AT LEAST ONE BOX)

 \checkmark 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.

 \checkmark A majority of the directors authorized the dissolution.

Signed this 10TH	_ day of _MARC	<u>H</u>	
Signature:	TA		
(By a director, pre	sident or other officer - if	directors or officers have no ourt appointed fiduciary, by	t been selected, by an incorporator - if that fiduciary.)
/	<pre></pre>		····· ··· ··· ··· ··· ··· ··· ··· ···
	HUGO R	SILVA	
	(Typed or prim	ed name of person signing)	· · · ·
Pre	sident/ Direct	or	

(Title of person signing)

Filing Fee: \$35