

P07000000629

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

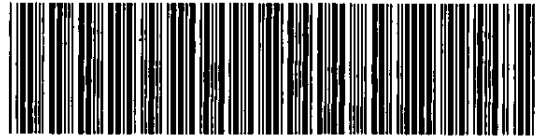
(Business Entity Name)

(Document Number)

Certified Copies ☒ Certificates of Status ☒

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05/03/10--01026--013 **60.00

FILED
2010 JUN -2 P 3 36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*Valid w/notice
Theris
6-2-10*

COVER LETTER

***TO:** Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION OF ROCKLEDGE HORIZON, INC.

DOCUMENT NUMBER: P0700000629

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

Please return all correspondence concerning this matter to the following:

JOHN KYLLO CONTROLLER
(Name of Contact Person)

ROCKLEDGE HORIZON, INC.
(Firm/Company)

P.O. Box 561087
(Address)

ROCKLEDGE, FLORIDA 32956
(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN KYLLO at (321) 474-0592
(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) - **ALREADY PAID**

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

May 6, 2010

JOHN KYLLO
ROCKLEDGE HORIZON, INC.
P. O. BOX 561087
ROCKLEDGE, FL 32955

SUBJECT: ROCKLEDGE HORIZON, INC.
Ref. Number: P07000000629

We have received your document for ROCKLEDGE HORIZON, INC. and check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The above entity is a Florida corporation the document submitted are for a Florida limited liability company. The correct form is enclosed, please complete and return to this office for processing.

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: 210A00011329

RECEIVED
2010 JUN -2 AM 8:00
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, 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:

ROCKLEGE HORIZON, INC.

SECOND: The document number of the corporation (if known): P0700000629

THIRD: The date dissolution was authorized: 4/18/2010

Effective date of dissolution if applicable: 4/18/2010
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

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)

JOHN KYLLO

(Typed or printed name of person signing)

VP + CONTROLLER

(Title of person signing)

FILED
2010 JUN -2 P 3:36
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: ROCKLEDGE HORIZON, INC.

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:


CLAIMANT NAME, DATE OF BILL OR SERVICE,
AMOUNT OF CLAIM.

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

ROCKLEDGE HORIZON, INC.
P.O. BOX 561087
ROCKLEDGE, FLORIDA 32956

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.

JOHN KYLLO
Printed Name of the Person Filing


Signature of the Person Filing

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