## P07000004171

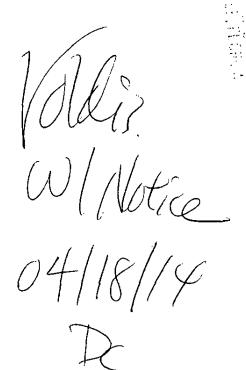
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Cities Officer	<u></u>
Special instructions to	rung Onicer.	
	<u>,                                     </u>	

Office Use Only



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04/14/14--01021--019 \*\*35.00



## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Request For Dièrolution  DOCUMENT NUMBER: P \$700004171
DOCUMENT NUMBER: PP700004171
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DENISE LONGSHAW
(Name of Contact Person)
(Name of Contact Person)  John Michael Smith Inc.
(Firm/Company)
6251 NW 2nd Street  (Address)  MARGATE, EL 33063  (City/State and Zip Code)
(Address)
MARGATE, EL 33063
(City/State and Zip Code)
For further information concerning this matter, please call:
Denise Longshaut (954) 478-2217  (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Ferson) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\to\$ \$43.75 Filing Fee \$\times\$ Certificate of Status \$\times\$ Certified Copy (Additional copy is enclosed) \$\times\$ (Additional copy is enclosed) \$\times\$ \$\
MAILING ADDRESS:  STREET ADDRESS:
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

## 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:  JOHN MICHAEL SMITH, INC.
SECOND:	TOHN MICHAEL SMITH, INC  The document number of the corporation (if known): PO7000004171
THIRD:	The file date of the articles of incorporation: $0/-09-2007$
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.
Sign	ature:  (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.)
	(Typed or printed name of person signing)
	President

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