

P07000049591

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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12/13/07--01005--002 \*\*35.00

Effective Date  
12/31/07

FILED  
07 DEC 13 AM 11:59  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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401414  
551D

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Advanced Rapid Machining, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P07000049591

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Darlene Isabelle

(Name of Contact Person)

Advanced Rapid Machining, Inc

(Firm/Company)

244 Burnham Intervale Rd

(Address)

Contoocook, NH 03229

(City/State and Zip Code)

For further information concerning this matter, please call:

Darlene Isabelle

(Name of Contact Person)

at ( 727 ) 364-1631

(Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

**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 607.1403, 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:

Advanced Rapid Machining, Inc

SECOND: The document number of the corporation (if known): P07000049591

THIRD: The date dissolution was authorized: 12-3-07

Effective date of dissolution if applicable: 12-31-07  
(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: [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)

Darlene Isabelle

(Typed or printed name of person signing)

Treasurer

(Title of person signing)

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TALLAHASSEE, FLORIDA

Filing Fee: \$35