## P07000052086

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MILLANASSEE, FLORIS

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August 19, 2009

S & S EXTREME PROTECTIVE COATING, INC. PO BOX 6 GREEN COVE SPRINGS, FL 32043

SUBJECT: S&S EXTREME PROTECTIVE COATING, INC.

Ref. Number: P07000052086

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson Document Specialist Supervisor

Letter Number: 709A00028143



August 6, 2009

S & S EXTREME PROTECTIVE COATING, INC. 647 EAST 27TH STREET JACKSONVILLE, FL 32216

SUBJECT: S&S EXTREME PROTECTIVE COATING, INC.

Ref. Number: P07000052086

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

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If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson Document Specialist Supervisor

Letter Number: 509A00026989

## **COVER LETTER**

Division of Corporations
SUBJECT: 5 ÉS Extreme Protective Coating I
DOCUMENT NUMBER: P07000052096
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
(Firm/Company) P.O.BUC
Green Cove Spring FL 32043-00 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person)  (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigsquare \\$43.75 Filing Fee & \$\bigsquare \\$43.75 Filing Fee & \$\bigsquare \\$52.50 Filing Fee, \$Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section  STREET ADDRESS: Amendment Section

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

## 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:		
	5 75 Extreme Protective Coating	į -	Inc
SECOND:	The document number of the corporation (if known): PO 70000 5 208	6	
THIRD:	The file date of the articles of incorporation:		
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.	990	
	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	09 OCT -8 PM	
SEVENTH:	Adoption of Dissolution (CHECK ONE)	PM 2:	7 G
	A majority of the incorporators authorized the dissolution.	(): ():	
	A majority of the directors authorized the dissolution.		-
Signa			
•	(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.)		
	Times the Roberts (Typed or printed name of person signing)		
	(Title of Person Signing)		

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: 5 = 5 Extens Rotectore Coaldny
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
Do comentation & invoicer
(NO Known creditors at)
distomation )
/
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)    Control   Contr
GREEN Cove Splings, FC 3204
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.
Printed Name of the Person Filing  Signature of the Person Filing
Trace trace of the religion rining