P0700059942

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SECRETARY OF STATE
VISION OF CERROLATION

C.COULLIETTE

JAN 06 2012

EXAMINER

COVER LETTER

TO: Amendment Section.

Division of Corporations

SUBJECT: Dissolution of Stith, Inc.	
DOCUMENT NUMBER: P07000059942	
The enclosed Articles of Dissolution and fee are submitted for fi	ling.
Please return all correspondence concerning this matter to the foll	owing:
Karen Soricelli	
(Name of Contact Person)	
Stith, Inc.	
(Firm/Company)	
15921 Greater Groves Blvd	
(Address)	
Clermont, FL 34714	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
	745-1046
(Name of Contact Person) (Area Code	& Daytime Telephone Number)
Enclosed is a check for the following amount:	
▼\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	
Amendment Section An Division of Corporations Div P.O. Box 6327 Cli	REET ADDRESS: nendment Section vision of Corporations fton Building 51 Executive Center Circle

Tallahassee, FL 32301

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	:	
	Stith, Inc.		
SECOND:	The document number of the corporation (if known): P07000059942		
THIRD:	The file date of the articles of incorporation: 5/18/2007		
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.		
	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)	JAN	MOTS.
	A majority of the incorporators authorized the dissolution.	-3	Wision of Cons
	A majority of the directors authorized the dissolution.	12 JAN -3 AM 11:00	RECENTAL RECENTATION
Signa	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	- if	
	Karen S. Soricelli (Typed or printed name of person signing)		
	President (Title of Person Signing)		

Filing Fee: \$35