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Division of Corporations

LIGHTSEY

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PO 7000101660

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : LIGHTSEY & ASSOCIATES, PA
Account Number : I20060000130
Phone : (407) 622-0025
Fax Number : (407) 622-0026

**DISSOLUTION OR WITHDRAWAL
SUPERIOR CONNECTIONS HOME THEATER, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

SECRETARY OF STATE
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December 10, 2009

FLORIDA DEPARTMENT OF STATE

Division of Corporations

SUPERIOR CONNECTIONS HOME THEATER, INC.
646 APPLGATE TERRACE
DELTONA, FL 32725

SUBJECT: SUPERIOR CONNECTIONS HOME THEATER, INC.
REF: P07000101660

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

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) 245-6906.

Darlene Connell
Regulatory Specialist II

FAX Aud. #: H09000255841
Letter Number: 909A00037748

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Resend.

12/31/09

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SUPERIOR CONNECTIONS HOME THEATER, INC.

DOCUMENT NUMBER: P07000101660

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

Please return all correspondence concerning this matter to the following:

SHANNON WURFEL

(Name of Contact Person)

(Firm/Company)

646 APPLGATE TERRACE

(Address)

DELTONA, FLORIDA 32725

(City/State and Zip Code)

For further information concerning this matter, please call:

SHANNON WURFEL

(Name of Contact Person)

at (386) 532-0181

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,
Certificate of Status &
Certified Copy
(Additional copy is
enclosed) |
|---|--|---|---|

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

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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:

SUPERIOR CONNECTIONS HOME THEATER, INC.

SECOND: The document number of the corporation (if known): P07000101660

THIRD: The date dissolution was authorized: DECEMBER 30, 2009

Effective date of dissolution if applicable: DECEMBER 31, 2009

(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: Shannon R. Wurfel

(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)

SHANNON WURFEL

(Typed or printed name of person signing)

VICE-PRESIDENT AND TREASURER

(Title of person signing)

Filing Fee: \$35

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