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COVER LETTER

TO: Amendment Section

Division of Corporations	-			
SUBJECT: Dissolution of Laid	Right Flooring, Inc			
DOCUMENT NUMBER: PO8000156	76			
The enclosed Articles of Dissolution and fee are submitted	for filing.			
Please return all correspondence concerning this matter to the	ne following:			
Ben Byrd				
(Name of Contact Person)				
(Firm/Company)				
5015 S. Orwell At				
(Address)				
Homosassa, Pl 34441	0			
(City/State and Zip Code)				
For further information concerning this matter, please call:				
	Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:				
\$35 Filing Fee \$\bigcup \$43.75 Filing Fee & \$\bigcup \$43.75 Filing Certified Copy (Additional copy enclosed)				
MAILING ADDRESS: Amendment Section	STREET ADDRESS: Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
ISHSDSCCA HI 4/4//	AND EVACUTIVA CANTAR CHROLA			

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:	
	Laid Kight Flooring, Inc.	
SECOND:	The document number of the corporation (if known): <u>P080000 156</u> 76	
THIRD:	The file date of the articles of incorporation: Feb. 12,2008	
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.	TALL TALL
SEVENTH:	Adoption of Dissolution (CHECK ONE)	E E
	A majority of the incorporators authorized the dissolution.	10 DEC -9 AM IO: 12
	A majority of the directors authorized the dissolution.	5 95
		To gi
Sign	ature: (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
	Ben Byrd (Typed or printed name of person signing)	
,	PVST (Title of Person Signing)	

Filing Fee: \$35