## PD8000043944

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STARE

## 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:
	Honger Marbtz and Tilo Inc
SECOND:	
THIRD:	The date dissolution was authorized: 2/26/2010 55
	Effective date of dissolution if applicable: 2/210/2010 To (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 of 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
	Rubert C. Henger - Sele Shareholder (voting group)
	Signature: Robert C Hengs  (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)
	(Typed or printed name of person signing)
	President
	(Title of manage gianage)

Filing Fee: \$35

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: HEnger Marble & Tile Inc	
DOCUMENT NUMBER: PU80000 43944	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
C. Henger (Name of Contact Person)	
Henger Marble & Tile Inc (Firm/Company)	
254 Cranz Lake Drive (Address)	
Porte Vzdra Brach FL 32082 (City/State and Zip Code)	
For further information concerning this matter, please call:	
DEBBIE Summons	
(Name of Contact Person) at (701) 626-5159  (Area Code & Daytime Telephone Number)	
(Name of Contact Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
□\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  □\$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS: Amendment Section  STREET ADDRESS: Amendment Section	
Division of Corporations  Division of Corporations	
P.O. Box 6327 Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314