P8000092047

· ·
(Requestor's Name)
(Address)
(Address)
(Hadiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name) www.
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600163392066



12/14/09--01028--022 **35.00



12/16/09

COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT:	SSOlution of Comp.	
DOCUMENT NUMBER:	8000092047	
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning thi	s matter to the following:	
Nelly tal	CS/AS tact Person)	
	FER STOP	
4736 Golden GATE Pluy (Address)		
NAPles Clity/State ar	3416 nd Zip Code)	
For further information concerning this matter,	please call:	
Nelly Iglesias (Name of Contact Person)	at (239) <u>601</u> 2339 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
Certificate of Status C	S43.75 Filing Fee & \$\sum \\$52.50 Filing Fee, Certified Copy Additional copy is enclosed) \$\sum \\$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, El. 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation, Affinia

FILED

of dissolution: FIRST: The name of the corporation as currently filed with the Florida Department of State: The document number of the corporation (if known): SECOND: The date dissolution was authorized: THIRD: Effective date of dissolution if applicable: Adoption of Dissolution (CHECK ONE) FOURTH: 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 Signature: (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)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation:

THE CHARLET STOP TWO

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

NON DUSINESS — DUSINESS COSED

JACK OF WOCK

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

4736 GOMEN GATE PLWY

NAPIES FL 34116

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.

Nelly Eglesiks

Printed Name of the Person Filing

against this corporation as provided in s. 607.1407, F.S.

Signature of the Person Filing