(Re	equestor's Name)	
(Ac	ddress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL .
(Bu	usiness Entity Nam	ne)
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	ocument Number)	,
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	· · · · · · · · · · · · · · · · · · ·

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations		
SUBJECT: DISSOLVE TROPICAL GULF HOMES INC		
DOCUMENT NUMBER: P 090 000 53 184		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
DALE C. NOLFF (Name of Contact Person)		
TROPICAL GULF HOMES, INC. (Firm/Company)		
720 NE 25Th AVE, UNIT 2		
(Address)		
CAPE CORAL, FL 33909		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
DALE C. NOLFF at (239) 673-9728		
(Name of Contact Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
□\$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee,  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional copy is enclosed)		
MAILING ADDRESS: STREET ADDRESS:		
Amendment Section Amendment Section		
Division of Corporations  Division of Corporations		
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle		
rananasse, flu 32317 2001 Executive Center Chee		

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

DIN CT		
FIRST:	The name of the corporation as currently filed with the Florida Department of State:	
	TROPICAL GULF HOMES, INC.	
SECOND:	The document number of the corporation (if known): P090000 5318 4	
THIRD:	The file date of the articles of incorporation: TUNE 19, 2009	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	(CHECK AT LEAST ONE BOX)  None of the corporation's shares have been issued.  The corporation has not commenced business.  No debt of the corporation remains unpaid.	
	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.	
SEVENTH:	Adoption of Dissolution (CHECK ONE)	
	A majority of the incorporators authorized the dissolution.	
	A majority of the directors authorized the dissolution.	
Sign	ature:  (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)	
Table a ridgett to model per a table a se	SECRETARY TREASUREIZ (Title of Person Signing)	

Filing Fee: \$35

## Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.
This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.
Name of Corporation: TROPICAL GULF HOMES, TNC.
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:
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
720 NE 25th AVE, UNIT Z
CAPE CORAL, FL 33909
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.
DAUE C. NOUFF  Printed Name of the Person Filing  Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00