P09000053949

(Re	questor's Name)	
(Ad	dress)	
(Ad	idress)	
(Cit	ry/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	Office Use On	lv.



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COVER LETTER

Division of Corporations	6
SUBJECT: CRYSTAL SPLASH	Zols, ne
DOCUMENT NUMBER: 999653	949
The enclosed Articles of Dissolution and fee are submitted for	filing.
Please return all correspondence concerning this matter to the f	following:
(Name of Contact Person)	<u></u>
(Firm/Company)	
4254 N. BAYWOOD DR (Address)	<u> </u>
HERNANDO FZ 34/4k (City/State and Zip Code)	12
For further information concerning this matter, please call:	
(Name of Contact Person) at (352 (Area Co) 634-4351 ode & Daytime Telephone Number)
Enclosed is a check for the following amount: \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ee & \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Amendment Section Division of Corporations P.O. Box 6327	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

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:
	CRYSTAL SPLASH POOLS, WC
SECOND:	The document number of the corporation (if known): \$\phi 9000053949
THIRD:	The file date of the articles of incorporation:
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.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	☐ A majority of the incorporators authorized the dissolution.
	majority of the directors authorized the dissolution.
Sign	ature:
	(By a director, prosident or other officer - it 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.)
	TAVED CIDATIONS
	(Typed or printed name of person signing)
	PRES
	(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: CRYSTAL SPLASH POOLS INC
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:
STOPPED DONG BUSINESS.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
4254 N. BAJWOOD DR
4254 N. BAJWOOD DR HERNANDO, FC 34447

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.
DAVID CORNELIUS MICH
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