

PD9000062564

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

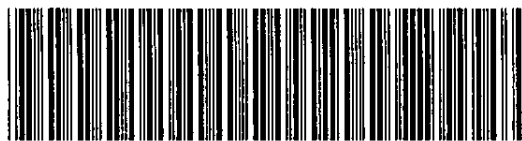
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06/22/12--01005--003 \*\*35.00

FILED  
12 JUN 22 AM 11:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*voided w/notice*

JUN 25 2012

T. LEWIS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Disolve For Profit Corporation

**DOCUMENT NUMBER:** p09000062564

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Horner

(Name of Contact Person)

Alpha Office Technologies, inc.

(Firm/Company)

441 Vincent Dr.

(Address)

Mount Dora, FL 32757

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Horner

(Name of Contact Person)

at ( 352 ) 267-7474

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☐ \$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, FL 32314

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

RECEIVED  
AMENDMENT SECTION  
DIVISION OF CORPORATIONS  
JUN - 8 AM 9:49  
TO JUDGE  
SUFFICE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 11, 2012

MICHAEL HORNER  
ALPHA OFFICE TECHNOLOGIES INC.  
441 VINCENT DRIVE  
MOUNT DORA, FL 32757

SUBJECT: ALPHA OFFICE TECHNOLOGIES INC.  
Ref. Number: P09000062564

We have received your document for ALPHA OFFICE TECHNOLOGIES INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6050.

Thelma Lewis  
Document Specialist Supervisor

Letter Number: 712A00016340

RECEIVED  
DIVISION OF CORPORATIONS  
JUN 11 2012

2012 JUN 22 AM 8:03

TO AGENCY OF RECORDS  
JUN 22 2012

## 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:

Alpha Office Technologies inc.

SECOND: The document number of the corporation (if known): p09000062564

THIRD: The file date of the articles of incorporation: 7/25/09

FOURTH: (CHECK AT LEAST ONE BOX)

☐ None of the corporation's shares have been issued.

☒ The corporation has not commenced business.

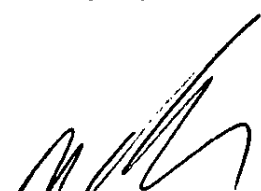
FIFTH: No debt of the corporation remains unpaid.

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.

☒ A majority of the directors authorized the dissolution.

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.)

Michael Horner

(Typed or printed name of person signing)

President

(Title of Person Signing)

**Filing Fee: \$35**

FILED  
12 JUN 22 AM 11:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 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: ALPHA office Technologies, 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:

LETTER STATING CLAIM  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

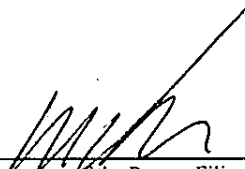
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

4295 OLD Hwy 441 #1  
MOUNT DORA FL 32757  
\_\_\_\_\_  
\_\_\_\_\_

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.

MICHAEL HORNER

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**