P11000057955

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
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2/10/14

COVER LETTER

TO: Amendment Section Division of Corporations **SUBJECT: DISSOLUTION OF CORPORATION** DOCUMENT NUMBER: P110000057955 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ALAN RICHARDSON (Name of Contact Person) AMPHIBIOUS SOLUTIONS INC. (Firm/Company) 6622 BAMBOO ST. (Address) PORT SAINT JOHN, FLORIDA 32927 (City/State and Zip Code) For further information concerning this matter, please call: ALAN RICHARDSON Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: ■ \$35 Filing Fee ■ \$43.75 Filing Fee & ■ \$43.75 Filing Fee & ■ \$52.50 Filing Fee, Certificate of Status & Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) STREET ADDRESS: **MAILING ADDRESS:** Amendment Section Amendment Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION

FILED

Pursuant to of dissolution			
FIRST:	The name of the corporation as currently filed with the Florida Department of State: AMPHIBIOUS SOLUTIONS INC.		
SECOND:	The document number of the corporation (if known): P11000057955		
THIRD:	The date dissolution was authorized: 01 October 2013		
	Effective date of dissolution <u>if applicable:</u> (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 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		
	PRESIDENT & SECRETARY		
	(voting group)		
	Signature: Clan Branch Control of the Control of th		
	ALAN RICHARDSON		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(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; AMPHIBIOUS SOLUTIONS 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: DATE OF CLAIM, NAMED PARTIES, DATE OF INCIDENT, COPIES OF INVOICES, CONTRACTS, CHECKS. ANY INFORMATION REGARDING CLAIM NOT SPECIFIED Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 6622 BAMBOO ST. PORT SAINT JOHN **FLORIDA** 32927 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. ALAN RICHARDSON

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

Printed Name of the Person Filing