

P12000020940

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

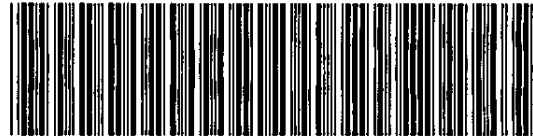
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800259253578

04/22/14--01019--013 **43.75

FILED
14 APR 22 PM 3:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WILLIAMS OF PENSACOLA INC.

DOCUMENT NUMBER: P12000020940

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

Please return all correspondence concerning this matter to the following:

MINH HO YANG

(Name of Contact Person)
WILLIAMS OF PENSACOLA INC

(Firm/Company)

3103 E STRONG ST

(Address)

PENSACOLA FLORIDA 32503

(City/State and Zip Code)

For further information concerning this matter, please call:

MINH HO YANG at **850** **432-7899**

(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 (Additional copy is enclosed)
Certificate of Status & Certified Copy (Additional copy is enclosed)

STREET ADDRESS:

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

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

FILED

14 APR 22 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, 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:

WILLIAMS OF PENSACOLA, INC.

SECOND: The document number of the corporation: **P12000020940**

THIRD: The date of dissolution was authorized: Monday, March 31, 2014.
Effective date of dissolution will be the date of filing.

FOURTH: Adoption of Dissolution (☒ ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

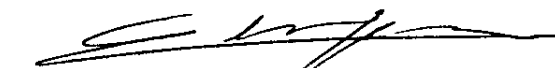
☐ Dissolution was approved by the shareholders through voting groups.

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

(voting group)

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.)

Printed Name: Ming Ho Yang

Title of person signing: President

FILED
14 APR 22 PM 3:33
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 § 607.1407, F.S.

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

Name of Corporation: **WILLIAMS OF PENSACOLA, 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:

- 1) A statement of the amount of your claim;
- 2) The legal name of the entity asserting the claim;
- 3) Identification or brief description of the agreement or other circumstances under which the claim arose; and
- 4) Any other information you believe may be useful to verify the nature and amount of the claim, including copies of any relevant documents.


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

MING HO YANG
3103 E STRONG ST
PENSACOLA, FL 32503

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.

MING HO YANG

Printed Name of the Person Filing


Signature of the Person Filing

FILED
14 APR 22 PM 3:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA