

P12000050310

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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8/2



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 25, 2013

MARK STURGEN
STURGEN ACCOUNTING, INC.
2253 COUNTRY PLACE CIR
PENSACOLA, FL 32534 US

SUBJECT: D NAILS, INC.
Ref. Number: P12000050310

We have received your document for D NAILS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporation is active therefore the revocation of dissolution cannot be filed.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Tina D Carter
Regulatory Specialist II

Letter Number: 613A00018050

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: D NAILS, INC.

DOCUMENT NUMBER: P12000050310

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

Please return all correspondence concerning this matter to the following:

MARK STURGEN

Name of Contact Person

STURGEN ACCOUNTING, INC.

Firm/Company

2253 COUNTRY PLACE CIR.

Address

PENSACOLA, FL 32534

City/State and Zip Code

MSTURGEN@COX.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARK STURGEN

Name of Contact Person

At (850) 968-4194

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

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:

D NAILS, INC

SECOND: The document number of the corporation (if known): **P12000050310**

THIRD: The date dissolution was authorized: **07/18/2013**

Effective date of dissolution if applicable: **07/18/2013**

(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

(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)

MARK STURGEN

(Typed or printed name of person signing)

INCORPORATOR

(Title of person signing)

Filing Fee: \$35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 AUG -2 PM 3:55

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