

P12000054033

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

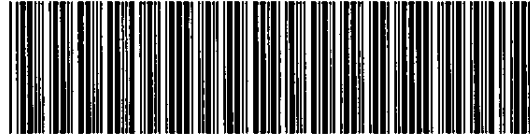
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

wrong form 4085

Office Use Only



700271708477

04/20/15--01035--019 **25.00

05/29/15--01013--024 **10.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 MAY 20 PM 3:56

Resolution

MAY 28 2015

D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Corporation

DOCUMENT NUMBER: P12000054033

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

Please return all correspondence concerning this matter to the following:

Paul H. Bowen

(Name of Contact Person)

Paul H Bowen P.A.

(Firm/Company)

P.O. Box 2067

(Address)

Palm Harbor, FL 34682

(City/State and Zip Code)

For further information concerning this matter, please call:

Paul H. Bowen

(Name of Contact Person)

at (727) 773-1554

(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)
- X \$10.00 - \$25.00 has already been paid

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

15 MAY 20 PM 3:58
SECRETARY OF STATE
TALLAHASSEE, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 5, 2015

PAUL H. BOWEN, ESQ.
PAUL H. BOWEN, P.A.
35111 U.S. HWY 19 N., SUITE 101
PALM HARBOR, FL 34684

SUBJECT: LIQUIDSKY HOLDINGS CORPORATION
Ref. Number: P12000054033

We have received your document for LIQUIDSKY HOLDINGS CORPORATION and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Liability Company, but your entity is a Corporation. Please complete and return the enclosed blank form(s).

There is a balance due of \$10.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 615A00009253

RECEIVED
15 MAY 20 PM 1:14
DIVISION OF STATE
DIVISION OF CORPORATIONS
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:

Liquidsky Holdings Corporation

SECOND: The document number of the corporation (if known): P12000054033

THIRD: The date dissolution was authorized: 6/14/12

Effective date of dissolution if applicable: Immediately
(no more than 90 days after dissolution file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

one
(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)

Paul H. Bowen

(Typed or printed name of person signing)

Trustee

(Title of person signing)

15 MAY 20 11 33 AM
SECRETARY OF STATE
TALLAHASSEE, FLORIDA