

P13 0000 18515

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

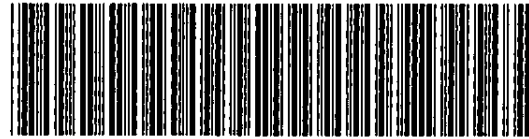
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900259108129

04/17/14--01006--012 **35.00

FILED
14 APR 17 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 24 2014

C. CARROTHERS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LALO FLA CORP Articles of Dissolution

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Ed Lechner

(Name of Contact Person)

Lab Corp.

(Firm/Company)

2626 Gulf to Bay Blvd.

(Address)

Clearwater, FL. 33759

(City/State and Zip Code)

For further information concerning this matter, please call:

Ed Lechner

(Name of Contact Person)

at (952) 844-0303

(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

FILED

14 APR 17 AM 8:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

LYLO FLA CORP

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

P13000018515

THIRD: The file date of the articles of incorporation:

02/26/2013

FOURTH: (CHECK AT LEAST ONE BOX)

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

☒ The corporation has not commenced business.

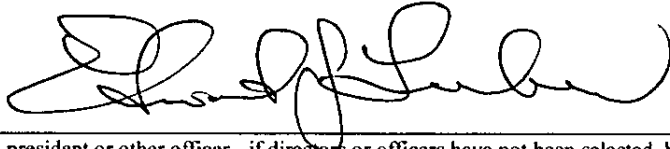
FIFTH: No debt of the corporation remains unpaid.

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.)

Edward J. Lechner

(Typed or printed name of person signing)

Director + Officer

(Title of Person Signing)

Filing Fee: \$35

Notice of Corporate Dissolution

FILED

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: LALO FLA CORP

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:

Person or business

address + phone number

contact person + their email

detail description of claim & bill if
applicable

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

2626 Gulf to Bay Blvd.
Clearwater, FL 33759

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.

Ed Lechner
Treasurer

Printed Name of the Person Filing

[Signature]

Signature of the Person Filing

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