

12/26/2019

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000370349 3)))



H190003703493ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

Please keep
original filing
date.

DISSOLUTION OR WITHDRAWAL
ARMA HOLDINGS, INC.

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$35.00 |

FILED

19 DEC 26 PM 4:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019 DEC 30 PM 1:43

Electronic Filing Menu

Corporate Filing Menu

Help

JAN 2 2020

T SCHROEDER

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:
ARMA Holdings, Inc.

SECOND: The document number of the corporation (if known): P13000078687

THIRD: The date dissolution was authorized: December 26, 2019

Effective date of dissolution if applicable: December 30, 2019
(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

(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)

James Fugh

(Typed or printed name of person signing)

President

(Title of person signing)

FILED
 19 DEC 26 PM 4:03
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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: ARMA Holdings, 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:

The basis of any claim with name, address, and amount of claim.

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

Buchanan Ingersoll & Rooney PC

Attn: Haley R. Ayure, Esq. and Mitchell I. Horowitz, Esq.

401 E. Jackson St., Ste. 2400

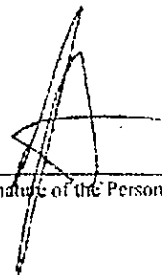
Tampa, FL 33602

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.

James Fugit, President

Printed Name of the Person Filing

Signature of the Person Filing



FILED
19 DEC 26 PM 4:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA