30000817

(Rec	questor's Name)	
(Ado	dress)	
(Add	dress)	
(City	//State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		







06/10/15--01019--014 **35.00

JUN 19 2015

I ALBRITTON

COVER LETTER

P

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations AMP ELEVATOR GROUP, INC. SUBJECT: P13000081773 **DOCUMENT NUMBER:** The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Lou DeVincentis (Name of Contact Person) (Firm/Company) 249 ODOM'S MILL BLVD (Address) PONTE VEDRA BEACH, FL 32082 (City/State and Zip Code) For further information concerning this matter, please call: Lou DeVincentis 904-568-3700 at ((Name of Contact Person) (Area Code) (Daytime Telephone Number) 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 Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **MAILING ADDRESS: STREET ADDRESS:** Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 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
	AMP ELEVATOR GROUP, INC.
SECOND:	The document number of the corporation (if known): P13000081773
THIRD:	The date dissolution was authorized: DECEMBER 31, 2014
	Effective date of dissolution if applicable:
	(no more than 90 days after dissolution tile 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
	In Cellen President-only shareholder (voting group)
	(voting group)
	Signature: Louis Ol Vincentes
	(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)
	LOUIS DEVINCENTIS
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)