

P14000031276

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

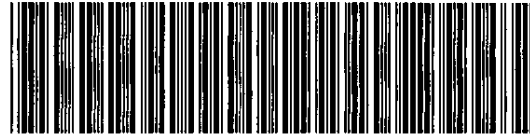
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 MAR - 9 PM 2:34

C.L.
3-10-15

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Stanley Pearlman Associates, Inc

DOCUMENT NUMBER: P14000031276

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

Please return all correspondence concerning this matter to the following:

Stanley Pearlman

Name of Contact Person

Stanley Pearlman Associates, Inc.

Firm/Company

6799 S.W. 93rd Court

Address

Ocala, FL 34481

City/State and Zip Code

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

For further information concerning this matter, please call:

Stanley Pearlman

Name of Contact Person

At (352) 237-2355

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 607.1401, 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:

Stanley Pearlman Associates, Inc.

SECOND: The document number of the corporation (if known): P14000031276

THIRD: The file date of the articles of incorporation: 4/7/2014

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.)

Stanley Pearlman

(Typed or printed name of person signing)

Incorporator

(Title of Person Signing)

Filing Fee: \$35

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DIVISION OF CORPORATE
15 MAR -9 PM 2:34

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: Stanley Pearlman Associates, 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:

Name/Address/Phone# of Individual or Company

Actual Description of Claim and Date

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

Stanley Pearlman

6799 S.W. 93rd Court

Ocala, FL 34481

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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.

Stanley Pearlman

Printed Name of the Person Filing

Stanley Pearlman

Signature of the Person Filing

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