## P1500019133

| (Re                                     | equestor's Name   | )            |  |  |  |  |
|---|-------------------|--------------|--|--|--|--|
| (Address)                               |                   |              |  |  |  |  |
| (Address)                               |                   |              |  |  |  |  |
| (City/State/Zip/Phone #)                |                   |              |  |  |  |  |
| PICK-UP                                 | ☐ WAIT            | MAIL         |  |  |  |  |
| (Ві                                     | usiness Entity Na | me)          |  |  |  |  |
| (Document Number)                       |                   |              |  |  |  |  |
| Certified Copies                        | _ Certificate     | es of Status |  |  |  |  |
| Special Instructions to Filing Officer: |                   |              |  |  |  |  |
|   |                   |              |  |  |  |  |
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SECRETARY OF STATE
TALL AHASSEF FLORIDA

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R. Writa

## COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327

**Division of Corporations** 

Tallahassee, FL 32314

| Division of Corporations   |  |  |  |  |  |
|--|--|--|--|--|--|
| SUBJECT: DISSOLUTION   |  |  |  |  |  |
| DOCUMENT NUMBER: P150000 19432   |  |  |  |  |  |
| The enclosed Articles of Dissolution and fee are submitted for filing.   |  |  |  |  |  |
| Please return all correspondence concerning this matter to the following:  |  |  |  |  |  |
| Prul GELETKO (Name of Contact Person)  |  |  |  |  |  |
|  |  |  |  |  |  |
| (Firm/Company)   |  |  |  |  |  |
| 7056 DX BOW RD   |  |  |  |  |  |
| 7056 OX BOW RD (Address)   |  |  |  |  |  |
| THELA-HASSEE FL 323/2 (City/State and Zip Code)  |  |  |  |  |  |
| (City/State and Zip Code)  |  |  |  |  |  |
| For further information concerning this matter, please call:   |  |  |  |  |  |
| Paul GELETKO at (\$50) 566 - 2926  (Name of Contact Person) (Area Code & Daytime Telephone Number)   |  |  |  |  |  |
| Enclosed is a check for the following amount:  |  |  |  |  |  |
| \$35 Filing Fee \$\to\$ \$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & Certificate of Status & Certified Copy (Additional copy is enclosed) |  |  |  |  |  |
| MAILING ADDRESS: STREET ADDRESS:   |  |  |  |  |  |

Amendment Section

Clifton Building

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

## 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:   |     |
|----------|--|-----|
|          | SETRO CONCRETE INC   |     |
| SECOND:  | The document number of the corporation (if known): $\frac{91500019423}{}$  |     |
| THIRD:   | The file date of the articles of incorporation: $\frac{2/27/15}{}$   |     |
| 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.   | ·11 |
| SEVENTH: | Adoption of Dissolution (CHECK ONE)  | 4 k |
|          | A majority of the incorporators authorized the dissolution.  | m   |
|          | A majority of the directors authorized the dissolution.  |     |
| Sign     | ature:  (By a director, president or other officer - if directors of officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.) |     |
|          | (Typed or printed name of person signing)  |     |
|          | SECRETARY  (Table of Brown Signing)  |     |

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:  | SETRO                   | CONCRETE                     | INC                                   |                      |
|---|-------------------------|------------------------------|---------------------------------------|----------------------|
| Date of dissolution will be to specified in the Articles of |                         | on is filed with the Depar   | rtment of State or as                 |                      |
| Description of information                                  | that must be include    | d in a claim:                |                                       |                      |
|   | ,                       |                              |                                       |                      |
|   |                         |                              |                                       |                      |
| · · · · · · · · · · · · · · · · · · ·                       |                         |                              |                                       |                      |
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|   |                         |                              | · · · · · · · · · · · · · · · · · · · |                      |
|   |                         |                              | <del>-</del>                          | <del></del>          |
| Mailing address where claim                                 | ms can be sent: (Clai   | ims cannot be sent to the    | Division of Corporat                  | ions)                |
| 5   | ETKO CE                 | DUCRETE                      |                                       |                      |
| 7   | 056 DX                  | BOW RI                       | >                                     | <del></del>          |
|   | TAUAHAS                 | BOW RI<br>BSEE, FL           | 323 <b>\$</b>                         | 2                    |
|   |                         |                              |                                       |                      |
| A claim against the above r within 4 years after the filing |                         | rill be barred unless a prod | ceeding to enforce th                 | e claim is commenced |
| PAUL  | GELETK                  | <u> </u>                     | Paul                                  | Celito               |
| Printed Na  | me of the Person Filing |                              | Signature of the Per                  | on Filing            |

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