

P1500005/536

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

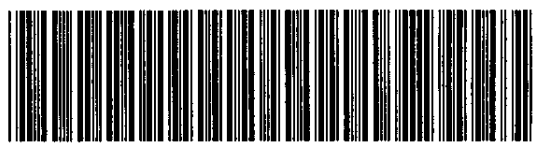
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:  
*Victor Verdi called back on 2/24/17 - He provided the date of dissolution for the document.*  
*SV*

Office Use Only



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02/21/17--01023--010 \*\*35.00

*V/D w/ notid*

S TALLENT  
FEB 24 2017

FILED  
17 FEB 21 AM 11:40  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ADAM AND ALYSSA GLASS INC  
\_\_\_\_\_

**DOCUMENT NUMBER:** P15000051536  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

VICTOR M. VERDI

\_\_\_\_\_  
(Name of Contact Person)

VERDI ASSOCIATES GROUP, INC.

\_\_\_\_\_  
(Firm/Company)

312 E. VENICE AVENUE SUITE 203

\_\_\_\_\_  
(Address)

VENICE, FLORIDA 34285

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

VICTOR M. VERDI

\_\_\_\_\_  
(Name of Contact Person)

732 829 8397

at (

\_\_\_\_\_  
(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 607.1403, 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:

ADAM & ALYSSA GLASS INC

SECOND: The document number of the corporation (if known): P15000051536

THIRD: The date dissolution was authorized: 12/31/2016

Effective date of dissolution if applicable: 01/31/2017

(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: Adam Pettit

(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)

ADAM L. PETITT

\_\_\_\_\_  
(Typed or printed name of person signing)

PRESIDENT

\_\_\_\_\_  
(Title of person signing)

FILED  
17 FEB 21 AM 11:40  
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: ADAM AND ALYSSA GLASS 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~~ must be included in a claim:

N/A

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

312 E. VENICE AVENUE SUITE 203

VENICE, FLORIDA 34285

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.

Printed Name of the Person Filing

Signature of the Person Filing

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