

P16000010098

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

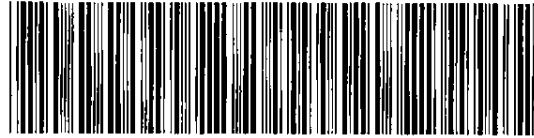
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

* Filing back dated to original date of receipt due to error on part of this office. Examiner failed to not proper document # and entity never received corrected corp.

Office Use Only

4/12/2017



500287338845

Eff. Date = July 31, 2016

07/21/16--01035--014 **\$5.00

FILED
2016 JUL 21 PM 4:34
CLERK OF STATE
TALLAHASSEE FLORIDA

M. MILLIGAN

APR 12 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 12, 2016

MARK L MASON
130 RIVIERA DUNES WAY STE 304
PALMETTO, FL 34221

SUBJECT: QUANTUM RESOLUTIONS, INC
Ref. Number: F15000001053

We have received your document for QUANTUM RESOLUTIONS, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Dissolution to dissolve a Florida domestic corporation have been submitted in error. A withdrawal application must be filed to withdraw the authority of a foreign corporation in Florida.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 816A00016155

Mark L. Mason
1041 Riverscape St.
Bradenton, FL 34208

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Articles of Dissolution

DOCUMENT NUMBER: ~~16000010098~~ P16000010098

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

Please return all correspondence concerning this matter to the following:

MARK L. MASON

(Name of Contact Person)

Quantum Resolutions Inc

(Firm/Company)

130 Riviera Dunes Way, Suite 304

(Address)

Palmetto Florida 34221

(City/State and Zip Code)

For further information concerning this matter, please call:

MARK L. MASON

(Name of Contact Person)

at (845-797-1289

(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:

Quantum Resolutions Inc

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

P16000010098
~~F15000001053~~

THIRD: The date dissolution was authorized:

JUNE 6, 2016

Effective date of dissolution if applicable: JULY 31, 2016

(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)

MARK L. MASON

(Typed or printed name of person signing)

President

(Title of person signing)

FILED
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TALLAHASSEE FLORIDA
STATE DEPT OF STATE