

P1600070865

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

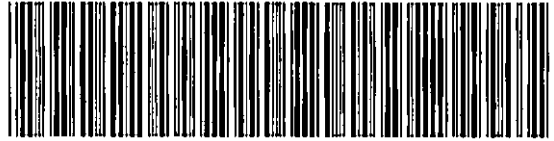
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700317857547

09/05/18--01015---000 **52.50

FILED
18 SEP -4 PM 2:31
TALLAHASSEE, FLORIDA

SEP 05 2018
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 12, 2018

ANDREW SIMPSON
ANDREW SIMPSON P.A.
76002 TIDEVIEW LANE
YULEE, FL 32087

SUBJECT: ANDREW SIMPSON, PA
Ref. Number: P16000070865

We have received your document for ANDREW SIMPSON, PA and check(s) totaling \$25.00. However, the document has not been filed and is being retained in this office for the following reason(s):

~~There is a balance due of \$10.00.~~ Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

Articles of Dissolution must comply with section 607.1401, Florida Statutes, if the corporation did not commence business or issue shares.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Shelia H Young
Regulatory Specialist II

Letter Number: 518A00002889

RECEIVED
18 SEP -6 PM 12:47
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION of ANDREW SIMPSON P.A

DOCUMENT NUMBER: P16000070865

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

Please return all correspondence concerning this matter to the following:

ANDREW SIMPSON

(Name of Contact Person)

ANDREW SIMPSON P.A.

(Firm/Company)

76002 TIDEVIEW LN

(Address)

YULEE, FL 32097

(City/State and Zip Code)

For further information concerning this matter, please call:

ANDREW SIMPSON

(Name of Contact Person)

at (904) 708-8784

(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:

ANDREW SIMPSON P.A.

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

THIRD: The file date of the articles of incorporation: _____

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.)

ANDREW SIMPSON

(Typed or printed name of person signing)

(Title of Person Signing)

FILED
18 SEP -4 PM 2:32
ST. JAMES
TALLAHASSEE, FLORIDA

Filing Fee: \$35