

P1700000 7845

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

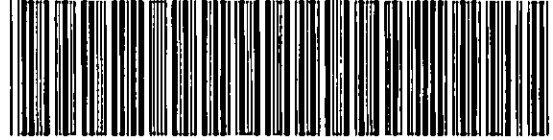
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200344869592

05/20/20--01008--008 **35.00

2020 JUN 20 PM 6:04

C. GOLDEN

JUN 19 2020

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION

DOCUMENT NUMBER: P17000007845

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

Please return all correspondence concerning this matter to the following:

JUSTIN HILDER BRANDT
(Name of Contact Person)

ABOVE ALL PAINTING & REMODELING INC
(Firm/Company)

2641 WINTERMEAD DR
(Address)

JACKSONVILLE FL 32073
(City/State and Zip Code)

For further information concerning this matter, please call:

JUSTIN HILDER BRANDT at 904 472-1283
(Name of Contact Person) (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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION

2020 20 P11 6:04

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:

ABOVE ALL PAINTING & REMODELING INC

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

P1700000 7845

THIRD: The date dissolution was authorized:

5-11-2020

Effective date of dissolution if applicable:

(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: Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.

NO WORK, WOULD LIKE TO CLOSE
COMPANY

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)

Justin Hilderbrand

(Typed or printed name of person signing)

Pres

(Title of person signing)

Filing Fee: \$35