P94000026355

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TALLAHASSEE, FLORID.

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DPIESE dissolve COVERLETTER	. (
TO: Amendment Section Division of Corporations attacked	then process resignation of agent			
SUBJECT: Rapport Associates, Inc. (DISSOUTION				
DOCUMENT NUMBER: P94000026	355			
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Reid V. Rapport				
(Name of Person)				
7/2				
(Name of Firm/Company)				
P.O. Box 720086				
(Address)				
Orlando FL 32872-6086				
(City/State/and Zip Code)	(City/State/and Zip Code)			
For further information concerning this matter, please call:				
	7) 658-1615 Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:				
\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Certificate of Status Certified Cop				
(Additional co	₹			
MAILING ADDRESS:	STREET ADDRESS:			
Amendment Section Division of Corporations	Amendment Section Division of Corporations			
P.O. Box 6327	409 E. Gaines Street			
Tallahassee, Florida 32314	Tallahassee, Florida 32399			

ARTICLES OF DISSOLUTION

Pursuant to of dissoluti	section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles on:
FIRST:	The name of the corporation as currently filed with the Florida Department of state: 8 Rapport Associates, Inc. 3
SECOND:	The document number of the corporation (if known): P94000026355
THIRD:	The date dissolution was authorized: AP(1), 20096 5
	Effective date of dissolution if applicable; AP(1) 26045 (no more than 90 days after dissolution file date)
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 of 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)
	Signed this 10 th day of April . 2005.
	Signature: (By a director, president or other officer if furectors 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)
	Reid V. Rapport (Typed or printed name of person signing)
	DIRECTOR (SOLE)
	(Title of person 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: Rapport Associates, FIC.
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 be included in a claim:
· Date of rendering of service or purchase
" Amount Charged for "
· Description of "
· Photocopy of Contractor Purchase Order Signed
- Proof of NON-Payment for Service or Purchase
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) P.O. Box 720086 Oxlando FL 32872-6086
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.
Reid V. Roppet Printed Name of the Person Filing Signature of the Person Filing