## P9400036105

(Re	equestor's Name)	
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	e #)
		•
PICK-UP	☐ WAIT	MAIL
		`
(Business Entity Name)		
(Document Number)		
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Cartified Carrier	Codificator	6 C4-4
Certified Copies Certificates of Status		s or Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO: Amendment Section

**Division of Corporations** 

,	
SUBJECT: MULTISTATE TILE	DISTRIBUTORS, INC.
DOCUMENT NUMBER: P94000036	3105
The enclosed Articles of Dissolution and fee	are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
HENRY J. BOUCHER, JR.	
(Name of Cor	ntact Person)
TESORO DISTRIBUTORS, II	NC.
(Firm/C	ompany)
191 POST ROAD WEST	
(Addr	ess)
WESTPORT, CT 06880	
	nd Zip Code)
For further information concerning this matter	, please call:
HENRY J. BOUCHER, JR.  (Name of Contact Person)	at ( 203 ) 221-2770  (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
(,	\$43.75 Filing Fee &
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

## . ARTICLES OF DISSOLUTION

FILED

Pursuant to of dissolution	section 607.1403, Florida Statutes, this Florida profit corporation subr <b>ings in Fig. 4: 36</b> pm.
	SECRETARY OF STATE
FIRST:	The name of the corporation as currently filed with the Florida Department of State: LORIDA
	MULTISTATE TILE DISTRIBUTORS, INC.
SECOND:	The document number of the corporation (if known): P94000036105
THIRD:	The date dissolution was authorized: DECEMBER 31, 2008
	Effective date of dissolution <u>if applicable</u> : DECEMBER 31, 2008  (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 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: Am Buch
	(By a director, president or other officer - if directors of officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	HENRY J. BOUCHER, JR.  (Typed or printed name of person signing)
	PRESIDENT
	(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: MULTISTATE TILE DISTRIBUTORS, 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 be included in a claim:

1. Detailed description, date and basis for claim (Goods sold,
Services performed, Loans, Wages, Compensation, other)
2. Supporting documentation (purchase orders,
notes, invoices, contracts, other)
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  MULTISTATE TILE DISTRIBUTORS, INC.  191 POST ROAD WEST  WESTPORT, CT 06880

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.

HENRY J. BOUCHER, JR.

Printed Name of the Person Filing

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