## P94000077980

| (Re                      | equestor's Name)   |           |  |  |
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| (Ad                      | ldress)            |           |  |  |
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| (Ad                      | ldress)            |           |  |  |
|                          |                    |           |  |  |
| (City/State/Zip/Phone #) |                    |           |  |  |
| PICK-UP                  | WAIT               | MAIL      |  |  |
|                          |                    |           |  |  |
| (Bu                      | isiness Entity Nar | ne)       |  |  |
|                          |                    |           |  |  |
| (Do                      | cument Number)     |           |  |  |
|                          |                    |           |  |  |
| Certified Copies         | _ Certificates     | of Status |  |  |
|                          |                    |           |  |  |
| Special Instructions to  | Filing Officer:    |           |  |  |
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C.COULLIETTE

JUN 0 4 2010

**EXAMINER** 

## **COVER LETTER**

| TO: Amendment Section Division of Corporations  |  |  |  |  |
|---|--|--|--|--|
| SUBJECT: Tresor Corporation   |  |  |  |  |
| DOCUMENT NUMBER: <u>P94000077980</u>  |  |  |  |  |
| The enclosed Articles of Dissolution and fee are submitted for filing.  |  |  |  |  |
| Please return all correspondence concerning this matter to the following:   |  |  |  |  |
| Michael Faurot  |  |  |  |  |
| (Name of Contact Person)  |  |  |  |  |
|   |  |  |  |  |
| (Firm/Company)  |  |  |  |  |
| 7/39 S US Hwy (Address)   |  |  |  |  |
|   |  |  |  |  |
| Port St. Lucie, FL 34952  |  |  |  |  |
| (City/State and Zip Code)   |  |  |  |  |
| For further information concerning this matter, please call:  |  |  |  |  |
|   |  |  |  |  |
| Michael Faurot at (772) 528-2076 (Name of Contact Person) (Area Code & Daytime Telephone Number)  |  |  |  |  |
| (Name of Contact Person) (Area Code & Daytime Telephone Number)   |  |  |  |  |
| Enclosed is a check for the following amount:   |  |  |  |  |
| □\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee,  Certificate of Status Certified Copy (Additional copy is enclosed)  Certified Copy (Additional copy is enclosed) |  |  |  |  |
| MAILING ADDRESS: Amendment Section  STREET ADDRESS: Amendment Section   |  |  |  |  |

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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   | of State:   | :           |
|---------|---|-------------|-------------|
|         | Tresor Corporation  |             |             |
| SECOND: | The document number of the corporation (if known): P94000077  | 980         | )           |
| THIRD:  | The date dissolution was authorized: 4202010  | <del></del> | <del></del> |
|         | Effective date of dissolution if applicable: 5/30/2010  (no more than 90 days after dissolution)  | n file date | )           |
| FOURTH: | Adoption of Dissolution (CHECK ONE)   |             |             |
|         | Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.   | for diss    | solution    |
|         | Dissolution was approved by the shareholders through voting groups.   |             |             |
|         | The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:   | entitled    |             |
|         | The number of votes cast for dissolution was sufficient for approval by   | - NOT BY    | Calcula     |
|         | (voting group)  | 3 ##11:34   |             |
|         | Signature: Tailad Faurot  |             |             |
|         | (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) |             |             |
|         | Michael Faurot  |             |             |
|         | (Typed or printed name of person signing)   |             |             |
|         | President   |             |             |
|         | (Title of person signing)   |             |             |

Filing Fee: \$35