

P94000089371

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

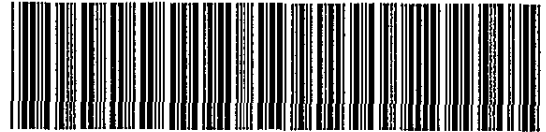
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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05 APR 25 AM 8:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(R/31/05--01013--011 \*\*35.00

44 vol.

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Corporate Dissolution

**DOCUMENT NUMBER:** P94000089371

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

Please return all correspondence concerning this matter to the following:

Michael R. Rieth

(Name of Person)

Clearwater Prosthetics & Orthotics, Inc

(Name of Firm/Company)

1001 37th Street North, Suite B

(Address)

St. Petersburg, FL 33713

(City/State/and Zip Code)

For further information concerning this matter, please call:

Michael R. Rieth

(Name of Person)

at ( 727 ) 321-3900

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |  |   |   |
|---|--|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>enclosed) |
|---|--|---|---|

**MAILING ADDRESS:**

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

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

April 13, 2005

MICHAEL R. RIETH  
CLEARWATER PROSTHETICS & ORTHOTICS, INC  
1001 37TH ST. NORTH, STE. B  
ST. PETERSBURG, FL 33713

SUBJECT: CLB OF PINELLAS, INC.  
Ref. Number: P94000089371

We have received your document for CLB OF PINELLAS, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

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) 245-6878.

Alan Crum  
Document Specialist

Letter Number: 905A00025320

RECEIVED  
05 APR 25 PM 4:37  
DIVISION OF CORPORATIONS

## 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:

~~Cleanway Plastics & Polymers, Inc.~~ CLB OF PINELLAS, INC

SECOND: The document number of the corporation (if known): P94000089371

THIRD: The file date of the articles of incorporation: 12/08/94

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.

Signed this 16th day of March, 2005.

Signature: X 

(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 R. Rieth

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35

FILED  
05 APR 25 AM 8:08  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

## 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: ~~Clearwater Prosthetics & Orthotics, Inc.~~ CLB OF PINELLAS, 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:

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Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

1001 37th Street North, Suite B

St. Petersburg, FL 33713

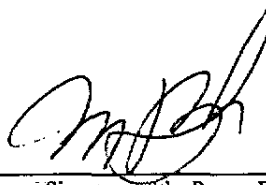
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A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Michael R. Rieth

Printed Name of the Person Filing

X 

Signature of the Person Filing

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