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COVER LETTER

TO: Amendment Section **Division of Corporations** Dissolution of Naples Remodeling, Inc. P96000103690 **DOCUMENT NUMBER:** The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Patrick Leavens (Name of Contact Person) Naples Remodeling, Inc. 620 NW 8th Street (Firm/Company) (Address) High Springs, FL 32643 (City/State and Zip Code) For further information concerning this matter, please call: Patrick Leavens (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: □\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee, Certificate of Status & Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional copy is enclosed) enclosed) STREET ADDRESS: **MAILING ADDRESS:** Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

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: Naples Remodeling, Inc.
SECOND:	The document number of the corporation (if known): P96000103690
THIRD:	The file date of the articles of incorporation: 12/20/1996
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.
Signa	ature: / deavens
	(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.)
	Patrick Leavens
	(Typed or printed name of person signing)
	President
	(Title of Person Signing)

Filing Fee: \$35