## P97000049083

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800144572978

02/27/09--01036--003 \*\*35.00



Voldis Wholice

Norther 3-3-09

## **COVER LETTER**

TO: Amendment Section		
Division of Corporations	•	
SUBJECT: DISSOLUTION OF MR RA	AIMO, INC.	
DOCUMENT NUMBER: <u>19700004</u>	9083	
The enclosed Articles of Dissolution and fee are	e submitted for filing	
	-	
Please return all correspondence concerning this	matter to the following:	
RAIMO SEPPANEN		
(Name of Contact Person)		
(Firm/Company)		
517 GREYNOLDS CIRCLE		
(Addres	s)	
LANTANA, FL 33461		
(City/State and	l Zip Code)	
For further information concerning this matter, please call:		
SAME AS ABOVE	at (	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
Certificate of Status Ce (Ad	#3.75 Filing Fee & \$\Bigsquare\ \\$52.50 Filing Fee, certified Copy Certificate of Status & Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 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:	IRST: The name of the corporation as currently filed with the Florida Department of State:	
	MR RAIMO, INC.	
SECOND:	The document number of the corporation (if known): P97000049083	
THIRD:	The file date of the articles of incorporation: 06/02/1997	
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.	
•		
Sign	ature:  (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.)	
	Raimo Seppanen  (Typed or printed name of person signing)	
	President (Tulo of Reson 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: MR RAIMO, 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:
NAME AND ADDRESS OF CLAIMANT, EXPLANATION WHERE
THE CLAIM HAS ARISEN.
NO KNOWN CLAIMS AGAINST THE CORPORATION EXISTS
AS OF 12/31/2008.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
517 GREYNOLDS CIRCLE
LANTANA, FL 33461
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.
RAIMO SEPPANEN Raimo Sego Onen
Printed Name of the Person Filing Signature of the Person Filing

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