

P98000006558

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

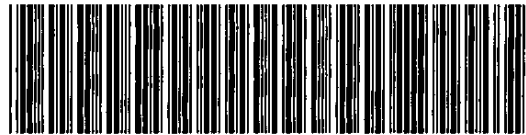
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

5510

STATE OF FLORIDA

OFFICE of VITAL STATISTICS
CERTIFIED COPYCERTIFICATE OF DEATH
FLORIDA

LOCAL FILE NO.

1. DECEDENT'S NAME AKA: MANNIE MAYNARD		FIRST MANNIE		MIDDLE		LAST MARCUS		2. SEX MALE	
3. DATE OF DEATH (Month, Day, Year) MAY 15, 2002		4. SOCIAL SECURITY NUMBER 104-16-7423		5a. AGE-Last Birthday (years) 78		5b. UNDER 1 YEAR Months Days		5c. UNDER 1 DAY Hours Minutes	
6. DATE OF BIRTH (Month, Day, Year) AUGUST 31, 1923		7. BIRTHPLACE (City and State or Foreign Country) MILFORD, MASSACHUSETTS				8. WAS DECEDENT EVER IN U.S. ARMED FORCES? (Yes or No) YES			
9a. PLACE OF DEATH (Check only one; see instructions on other side) HOSPITAL: <input type="checkbox"/> Inpatient <input type="checkbox"/> Outpatient <input type="checkbox"/> DOA <input type="checkbox"/> OTHER: <input checked="" type="checkbox"/> Nursing Home <input checked="" type="checkbox"/> Residence <input type="checkbox"/> Other (Specify)						9b. INSIDE CITY LIMITS? (Yes or No) YES			
3c. FACILITY NAME (If not institution, omit check and number)						3d. CITY, TOWN, OR LOCATION OF DEATH			

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ARTICLES OF DISSOLUTION

DOCUMENT NUMBER: P98000006558

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

Please return all correspondence concerning this matter to the following:

JOHN ADOMAITIS

(Name of Contact Person)

APPAREL WORLD INC

(Firm/Company)

6560 126TH AVE

(Address)

LARGO, FLORIDA 33773

(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN ADOMAITIS

(Name of Contact Person)

at (727) 533-9331

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee ☒ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, 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: The name of the corporation as currently filed with the Florida Department of State:

APPAREL WORLD, INC.

SECOND: The document number of the corporation (if known): P98000006558

THIRD: The file date of the articles of incorporation: 01/20/1988

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.

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TALLAHASSEE FLORIDA

Signature: John Adomaitis

(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.)

JOHN ADOMAITIS

(Typed or printed name of person signing)

DIRECTOR

(Title of Person Signing)

Filing Fee: \$35