

P98000015960

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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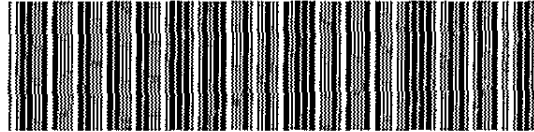
(Business Entity Name)

(Document Number)

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08/03/06--01004--009 \*\*52.50

EFFECTIVE DATE  
8/7/06

*THIS  
FOR DIS  
w/notice*

FILED  
06 AUG -3 AM 1:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Amendment Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

SUBJECT: Dissolution of Dolphin Mooring Whips, Inc

DOCUMENT NUMBER: P98000015960

The enclosed Articles of Dissolution, Notice of Corporate Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Diane B. Bell, Esq  
MacLean and Ema  
2600 NE 14<sup>th</sup> Street Causeway  
Pompano Beach, FL 33062

For further information concerning this matter, please call:

Diane B. Bell, Esq. at 954-785-1900

Enclosed is a check for the following amount:

\$52.50 for filing fee, Certificate of Status and Certified Copy.

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**ARTICLES OF DISSOLUTION**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 State is Dolphin Mooring Whips, Inc.

**SECOND.** The document number of the corporation is P98000015960.

**THIRD.** The dissolution was authorized on July 31, 2006 and the effective date of dissolution is August 7, 2006.

**FOURTH.** The dissolution was unanimously approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.



BY: George Wenk,  
President and Director

## 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 section 607.1407, Florida Statutes.

Name of Corporation: Dolphin Mooring Whips, Inc

Date of dissolution will be August 7, 2006.

The following must be included in the claim:

Name of Business or Individual entitled to claim  
Contact Name, Number and Address  
Copy of contract and/or invoice  
Date of service rendered or materials supplied  
Amount of Claim

Please mail all claims to:

Dolphin Mooring Whips, Inc.  
c/o Amerilawyer  
343 Almeria Avenue  
Coral Gables, FL 33134

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



BY: George Wenk  
President and Director