

14- P980000042432

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DIVISION OF CORPORATIONS
12 FEB 17 PM 12:08

AK4 DISS
@ 2/17/12

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Laser Wizard Inc.

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Jimmy Walsh
Name of Contact Person

Laser Wizard
Firm/Company

39 Lemon Twist Ln.
Address

Port Orange FL 32129
City/State and Zip Code

laserwizard@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James Walsh at (386) 760-0655
Name of Contact Person 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:

Laser Wizard Inc.

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

P980000045435

THIRD: The file date of the articles of incorporation: 4-1998

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.

Signature: _____

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

James K. Waisc

(Typed or printed name of person signing)

President

(Title of Person Signing)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

Filing Fee: \$35