## 19900030576

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

OF OFF 23 PM 1: 47

1/4/06 Diss/ notice

## **COVER LETTER**

Division of Corporations	
SUBJECT: NICHOLAS T. BILLETT, INC.	
DOCUMENT NUMBER: P9900030576	
The enclosed Articles of Dissolution and fee are submitted	l for filing.
Please return all correspondence concerning this matter to t	the following:
NICHOLAS T. BILLETT (Name of Contact Person)	
NICHOLAS T. BILLETT, INC.	
(Firm/Company)	
4731 OLD FARMS RD.	
(Address)	
SARASOTA FL 34233	
(City/State and Zip Code	)
For further information concerning this matter, please call:	
NICHOLAS T. BILLETT at ( 941 (Area	) 544-8543 a Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee	•
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 607.1403, 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	of State:
	NICHOLAS T. BILLETT, INC.	
SECOND:	D0000000E70	·
THIRD:	The date dissolution was authorized: 20 December 2005	
	Effective date of dissolution if applicable: 31 December 2005 (no more than 90 days after dissolution	ı file date)
FOURTH:	Adoption of Dissolution (CHECK ONE)	• •
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for dissolution
	Dissolution was approved by of the shareholders through voting groups.	
	The following statement must be separately provided for each voting group of to vote separately on the plan to dissolve:	entitled
	The number of votes cast for dissolution was sufficient for approval by	NEGRET FACORPINES
	(voting group)	PH 1:41
	Signature:  (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)	
	NICHOLAS T. BILLETT  (Typed or printed name of person signing)	
	Director and Sole Shareholder	

Filing Fee: \$35

(Title of person signing)

## **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: NICHOLAS T. BILLETT, Inc.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
Nature and Date of the Claim:
Amount of Claim:
Name of Claimant:
Address of Claimant:
Telephone Number of Claimant:
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
NICHOLAS T. BILLETT
4731 OLD FARMS RD.
SARASOTA FL 34233
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.
NICHOLAS T. BILLETT Wholes of Bellett

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

Signature of the Person Filing

Printed Name of the Person Filing