

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phon	= #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	ne)	
(Do	cument Number)		
Certified Copies	Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only

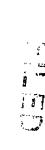
7.810



000167765280

02/05/10--01018--005 **35.00

) 67 / SECRE DARY OF STATE



COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Dissolution "Thomas E. Evans,	Inc.
DOCUMENT NUMBER: K68719	
The enclosed Articles of Dissolution and fee are submi	tted for filing.
Please return all correspondence concerning this matter	to the following:
Thomas Evans	
(Name of Contact Pers	son)
Thomas E. Evans, Inc.	
(Firm/Company)	
700 Mirror Terrace, NW, # 106	
(Address)	
Winter Haven, FL 33881	
(City/State and Zip C	ode)
For further information concerning this matter, please c	all:
Thomas Evans at (8	63 604-2553
(Name of Contact Person) (A	Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
▼\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 F Certificate of Status Certified (Addition enclosed	al copy is Certified Copy
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

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 State: THOMAS EDWARD EVANS, JR			
SECOND:	The document number of the corporation (if known): K68719 The date dissolution was authorized: 12/15/2009			
mind.	Effective date of dissolution if applicable: 12/31/2009 (no more than 90 days after dissolution file date)			
FOURTH:	Adoption of Dissolution (CHECK ONE) Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval. Dissolution was approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve: The number of votes cast for dissolution was sufficient for approval by (voting group)			
	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) THOMAS EDWARD EVANS, JR (Typed or printed name of person signing) President/Director/Shareholder			
	(Title of person signing)			

Filing Fee: \$35