

PO80000051901

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

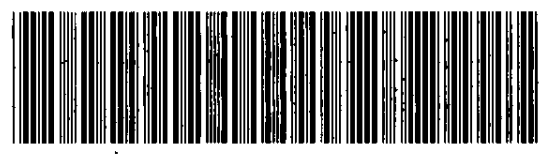
(Business Entity Name)

(Document Number)

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SECRETARY OF FLORIDA  
TALLAHASSEE, FLORIDA  
10 JAN - 8 PM 12:54

AND DIS cc  
w/notice  
@ 1/8/10

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DISSOLUTION OF S-CORPORATION

**DOCUMENT NUMBER:** P08000051901

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

Please return all correspondence concerning this matter to the following:

JACK D. LOGVIN

(Name of Contact Person)

BLOOMING COMMUNITY INC

(Firm/Company)

1441 SW 30TH AVE SUITE 28

(Address)

POMPANO BEACH FL 33309

(City/State and Zip Code)

For further information concerning this matter, please call:

JACK D. LOGVIN at (716) 316-4756

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 21, 2009

JACK D. LOGVIN  
BLOOMING COMMUNITY INC  
1441 SW 30TH AVE - SUITE 28  
POMPANO BEACH, FL 33309

SUBJECT: BLOOMING COMMUNITY INC.  
Ref. Number: P08000051901

We have received your document for BLOOMING COMMUNITY INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton  
Regulatory Specialist II

Letter Number: 709A00038735

RECEIVED  
2010 JAN -8 AM  
REGULATORY  
TALLAHASSEE

**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:

Blooming Community INC.

SECOND: The document number of the corporation (if known): PO 80000 51901

THIRD: The date dissolution was authorized: December 04, 2009

Effective date of dissolution if applicable: December 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)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 JAN - 8 PM 12: 54

Signature: Jack D Logvin Vice President

(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)

JACK D. LOGVIN

(Typed or printed name of person signing)

Vice President

(Title of person signing)

**Filing Fee: \$35**

## 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: BLOOMING COMMUNITY INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

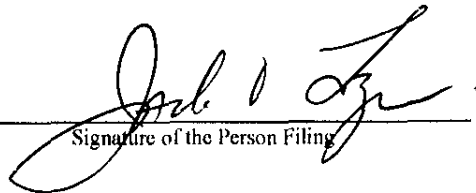
INVOICES SHOWING BUSINESS NAME + AMOUNT  
due.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

JACK LOGVIN  
6597 506 Palm Dr.  
BOYNTON Bch FL 33437

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.

JACK D LOGVIN  
Printed Name of the Person Filing

  
Signature of the Person Filing

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