P99000041561

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Business Entity Name)	
(Document Number)	
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COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: Dissolution of D. J S	t. Pete, Inc.	
DOCUMENT NUMBER: P990	00041561	
The enclosed Articles of Dissolution and f	ee are submitted for filing	ng.
Please return all correspondence concerning	g this matter to the follo	wing:
Donna Eaton		
(Name of	Contact Person)	·
(Firm	n/Company)	
8745 Forest Willow Trail		
(A	ddress)	
Reno, NV 89523		
(City/Sta	te and Zip Code)	
For further information concerning this ma	tter, please call:	
Donna Eaton	at (775)	747-7113
(Name of Contact Person)		& Daytime Telephone Number)
Enclosed is a check for the following amou	ınt:	
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	✓ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:	•	REET ADDRESS:
Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
Tallahassee, FL 32314	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:
	D. J St. Pete, Inc.
SECOND:	The document number of the corporation (if known): P990004156
THIRD:	The date dissolution was authorized: 12/31/2008
	Effective date of dissolution if applicable: 12/31/2008 (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
	Donna Eaton South Allas
	(Typed or printed name of person signing) President
	(Title of person signing)

Filing Fee: \$35

Notice of Corporate Dissolution

gainst 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: D. J St. Pete, Inc.
Date of dissolution will be the date the dissolution is filed with the Department of State or as pecified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
Date of claim, date of alleged service rendered, name of claimant, proof of
services rendered
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Donna Eaton
8745 Forest Willow Trail
Reno, NV 89523
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.
Donna Eaton Noun Kill
Printed Name of the Person Filing Signature of the Person Filing