

197568

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

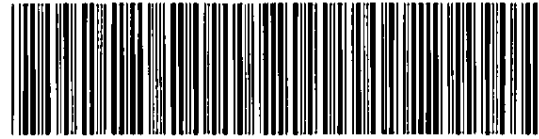
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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08/29/17--01001--010 \*\*35.00

17 AUG 28 PM 3:48

2017 AUG 28 PM 3:59

AUG 23 2017

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

2017 AUG 28 PM 3:56

**SUBJECT:** Dissolution of Corporation

**DOCUMENT NUMBER:** 197568

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

Please return all correspondence concerning this matter to the following:

SEAN EDWARD JONES

(Name of Contact Person)

JONES MANAGEMENT CORP.

(Firm/Company)

513 OSCEOLA ST

(Address)

TALLAHASSEE FL 32310

(City/State and Zip Code)

For further information concerning this matter, please call:

SEAN EDWARD JONES

(Name of Contact Person)

at ( 561-252-9569

(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

ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED

2017 AUG 28 PM 3:56  
mits the following articles

JONES MANAGEMENT CORP

The document number of the corporation (if known): 199568

The date dissolution was authorized: 08/28/17

(no more than 90 days after dissolution file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

*The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:*

(voting group)

(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)

(Typed or printed name of person signing)

(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: Jones Management Corp

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:

President of Corporation is Deceased, At time  
of Death, Edward Jones Sr was President, Secretary,  
and Registered Agents All others Share Holders shares  
were bought, and

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

513 Osceola St  
Tallahassee Fl. 32310

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.

SEN Edward Jones/Executor of Estate

SEN Edward Jones/Executor  
Printed Name of the Person Filing

SEN Edward Jones/Executor  
Signature of the Person Filing  
of  
Estate