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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations SUBJECT: MAYFAIR PLAZA, INC. DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Raymond G. Robison (Name of Contact Person) Fox McCluskey Bush Robison, PLLC (Firm/Company) 3461 SE Willoughby Blvd. (Address) Stuart, FL 34994 (City/State and Zip Code) For further information concerning this matter, please call: Raymond G. Robison (Area Code) (Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: □ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & ■ \$52.50 Filing Fee. Certificate of Status & Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) STREET ADDRESS: **MAILING ADDRESS:** Amendment Section Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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 State: MAYFAIR PLAZA, INC.				
SECOND:	The document number of the corporation (if known):				
THIRD:	The date dissolution was authorized:				
	Effective date of dissolution if applicable:				
	(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.				
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)
		James K. Bruner			
	(Typed or printed name of person signing)				
	President				
	2001 B 2 2 2 3				

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: MAYPAIR PLAZA, 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;		2020	_
Name and Address of Claimant		JUL 3	
Amount of Claim	1813 to 10 7 3	0 A	
Whether Claim is Secured or Contingent	변5 <u>공</u> 코	=	D
Detailed Description of Type of Claim	(n	25	
Date Claim Arose			
875 SE Monterey Commons Blvd. Stuart, FL 34996			
A claim against the above named corporation will be barred unless a proceeding to enforce the within 4 years after the filing of this notice.	e claim	is comr	nencec
James K. Bruner, President Printed Name of the Person Filing Signature of the Person	ecc son Filing	<u></u>	

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