## 258(81

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(В	usiness Entity Na	me)
(Do	ocument Number)	)
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R. White

## **COVER LETTER**

Division of Corporations				
SUBJECT: The Burt Corpora	ation			
DOCUMENT NUMBER: 258681				
The enclosed Articles of Dissolution and f	ee are submitted for filing.			
Please return all correspondence concerning	g this matter to the following:			
David A. Burt				
(Name of	Contact Person)			
Hawkins, Hawkins & Burt, LLP				
(Firm	(Firm/Company)			
501 South Ridgewood A	Ave.			
(A	ddress)			
Daytona Beach, FL 32114				
(City/Sta	te and Zip Code)			
For further information concerning this may	tter, please call:			
David A. Burt	at (386 ) 252-4499			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amou	int:			
■ \$35 Filing Fee ■ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)			
MAILING ADDRESS:	STREET ADDRESS:			
Amendment Section	Amendment Section			
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building			
Tallahassee FI 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  The Burt Corporation	of State	e:	
SECOND:	The document number of the corporation (if known): 258681			
	The date dissolution was authorized: September 15, 2014			
THIRD:	Effective date of dissolution if applicable: When Filed  (no more than 90 days after dissolution)	on file da	te)	_
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes cas was sufficient for approval.	t for di	ssolu	tion
	Dissolution was approved by the shareholders through voting groups.			
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitle.	d 译	
	The number of votes cast for dissolution was sufficient for approval by	THE SECTION AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AD	OCT 27	
	(voting group)	ELONIA.	胡川: 32	
	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)			
	David A. Burt			
	(Typed or printed name of person signing)			
	Vice President and Director			
	(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: The Burt Corporation				
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:				
Name and Address of Creditor				
Amount of Claim				
Nature of Claim				
Date Claim Arose				
Account Numbers of Any Accounts related to Claim.				
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)				
David A. Burt				
Hawkins, Hawkins & Burt, LLP				
501 South Ridgewood Ave.				
Daytona Beach, FL 32114				

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.

David A. Burt

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