

306020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

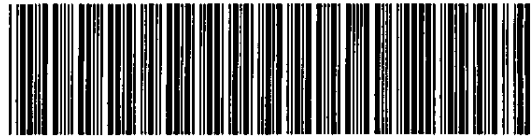
(Document Number)

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05/10/07--01014--024 \*\*52.50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

07 MAY 10 AM 11:55

APPROVED  
AND  
FILED

B. McKnight MAY 16 2007

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Voluntary Corporate Dissolution-Christy's Sundown Restaurant, Inc.

**DOCUMENT NUMBER:** 306020

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

Please return all correspondence concerning this matter to the following:

Ann Christy

(Name of Person)

N/A

(Name of Firm/Company)

1225 Havendale Blvd., Apt. 428

(Address)

Winter Haven, FL 33881

(City/State/and Zip Code)

For further information concerning this matter, please call:

Ann Christy

(Name of Person)

at ( 863 )

602-9834

(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, Florida 32314

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

## 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:

Christy's Sundown Restaurant, Inc.

SECOND: The document number of the corporation (if known): 306020

THIRD: The date dissolution was authorized: 05/02/07

Effective date of dissolution if applicable: 05/02/07

(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 of 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)

Signed this 2nd day of May, 2007

Signature: Ann Christy

(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)

Ann Christy

(Typed or printed name of person signing)

Director and Secretary

(Title of person signing)

Filing Fee: \$35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## 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: Christy's Sundown Restaurant, 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:

Name of Claimant.

Claimant's address, telephone and/or facsimile number, and email address (if any).

Nature of Claim.

Effective date of claim and a copy of the agreement and/or contract evidencing the claim.

Name of the person at Christy's Sundown Restaurant, Inc. that Claimant contracted with concerning the claim.

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

Ann Christy

1225 Havendale Blvd., Apt. 428

Winter Haven, FL 33881

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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.

Ann Christy

Printed Name of the Person Filing

Ann Christy

Signature of the Person Filing

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