

527369

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

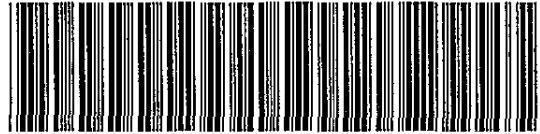
(Business Entity Name)

(Document Number)

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QSS

09/24/04--01012--008 \*\*35.00

EFFECTIVE DATE  
9/30/04

FILED  
04 SEP 24 AM 8:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Uo/dis

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Rogers, Coleman, Pendas, Knapp & Dill, P.A.

**DOCUMENT NUMBER:** 527369

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

Please return all correspondence concerning this matter to the following:

Andrea Perito, Controller

(Name of Person)

Rogers, Coleman, Pendas, Knapp & Dill, P.A.

(Name of Firm/Company)

P.O. Box 3427

(Address)

Orlando, FL 32802

(City/State/and Zip Code)

For further information concerning this matter, please call:

Andrea Perito, Controller

(Name of Person)

at ( 407 ) 849-6459

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |  |   |   |
|---|--|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>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 Department of State:

Rogers, Coleman, Pendas, Knapp & Dill, P.A.

SECOND: The document number of the corporation (if known): 527369

THIRD: The date dissolution was authorized: 08/25/04

Effective date of dissolution if applicable: 09/30/04

(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 \_\_\_\_\_ day of \_\_\_\_\_.

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)

James A. Coleman

(Typed or printed name of person signing)

Vice President

(Title of person signing)

**Filing Fee: \$35**

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