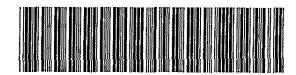
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(Req	uestor's Name)	
(Add	ress)	
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(City)	/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	

Office Use Only

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TRANSMITTAL LETTER

TO: Amendment Section

Division of Corporations				
SUBJECT: IMPERIALAKES REALTY CORPORATION				
DOCUMENT NUMBER: # 528/17				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Name of Person)				
· · · · · · · · · · · · · · · · · · ·				
I YPERIAL AKES REALTY CORPORATION				
(Name of Firm/Company)				
P.O. BOX 7867				
(Address)				
HILTON HEAD SC. 29938 (City/State/and Zip Code)				
(City/State/and Zip Code)				
For further information concerning this matter, please call:				
Name of Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)				
MAILING ADDRESS: STREET ADDRESS;				
Amendment Section Amendment Section				
Division of Corporations P.O. Box 6327 Division of Corporations 409 F. Gaines Street				
P.O. Box 6327 409 E. Gaines Street Tallahassee, Florida 32314 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:	
	IMPERIALAKES REALTY CORPORATION	
SECOND:	The document number of the corporation (if known): # 528/17	
THIRD:	The date dissolution was authorized:	
	Effective date of dissolution if applicable: 4/15/05 (no rate 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	
	, · · · · · · · · · · · · · · · · · · ·	-1
	(voting group)	· ·
	Signed this 07 day of APRIL 2005.	
		ه در
Signat		
	(By a discount, provident or other officer - if directors or officers have not been selected, by an i neopporator - if in the hands of a receiver trustee, or other court appointed fiduciary, by that fiduciary)	r
	LE S	
	JAMES A. MOORE	T
	(Typed or printed name of person signing)	Principal Control of C
	PRESIDENT / DIRECTOR TO	П
	(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. 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: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) HILTON HEAD, SC. 29938 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.

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