

543398

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900253537819

12/16/13--01019--018 **35.00

RECEIVED
ALLAHASSEE, FLORIDA

13 DEC 16 PM 1:31

DEC 16 2013

S. PRATHER

SWAINE & HARRIS, P. A.

ATTORNEYS AT LAW

BERT J. HARRIS, III
J. MICHAEL SWAINE
KIMBERLY L. SAPP
ROBERT S. SWAINE
SCOTT R. LECONY
THOMAS J. WOHL

PLEASE REPLY TO:
LAKE PLACID
SEBRING



December 12, 2013

425 SOUTH COMMERCE AVENUE
SEBRING, FL 33870-3702
(863) 385-1549
FAX: (863) 471-0008

401 DAL HALL BLVD.
LAKE PLACID, FL 33852-6561
(863) 465-2811
FAX: (863) 465-6999

www.heartlandlaw.com

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

Re: W.S. Randall, Inc.

Gentlemen:

Enclosed are the original and one copy of Articles of Dissolution for W.S. Randall, Inc. Please file the original, file stamp the copy and return it to me in the enclosed return envelope. Also enclosed is our check in the amount of \$35.00 for your fee.

If you have any questions or if anything further is required, please contact me.

Sincerely yours,

J. Michael Swaine

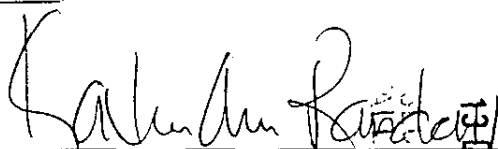
JMS:tw
Enc.

**ARTICLES OF DISSOLUTION
OF
W.S. RANDALL, INC.**

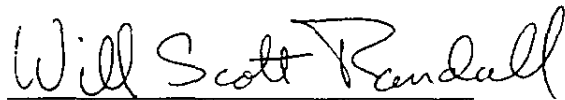
The undersigned officers of **W.S. RANDALL, INC.** in compliance with the provisions of Chapter 607.1403, Florida Statutes, hereby give notice of the dissolution of the corporation and certifies that:

1. The name of the corporation is **W.S. RANDALL, INC.**
2. The document number of the corporation is 543398.
3. The date dissolution was authorized is September 24, 2013.
4. The effective date of dissolution is November 30, 2013.
5. All of the shareholders executed a written consent to dissolve the corporation pursuant to Chapter 607.0704, Florida Statutes.

DATED THIS 24 day of October, 2013.


Kathleen Ann Randall, President

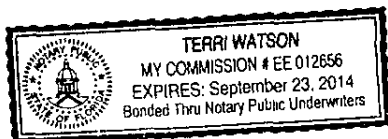
Attest:




Will Scott Randall, Secretary

**STATE OF FLORIDA
COUNTY OF HIGHLANDS**

I HEREBY CERTIFY that on this day, before me, a notary public duly authorized in the state and county named above to take acknowledgments, personally appeared **KATHLEEN ANN RANDALL** and **WILL SCOTT RANDALL**, to me well known or who produced _____ as identification this 25 day of October, 2013.




Notary Public, State of Florida
(affix notarial seal)

13 DEC 16 PM 1:32
NOTARY PUBLIC
STATE OF FLORIDA