## 666047

(Req	uestor's Name)	
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(City	/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



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11/16/05--01014--007 \*\*35.00

DIVISION OF CORPORATION 2005 NOV 16 AM 8: 10

EFFECTIVE DATE (1/30/05

Vold:s w/notice

11/2

## COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Seibel Acceptance Company
DOCUMENT NUMBER: 666047
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
KATHRYN HARRIS (Name of Contact Person)
(Firm/Company)
120 NW 122 St.
120 NW 122 St.  (Address)  GAINESUILLE FE 32607  (City/State and Zip Code)
For further information concerning this matter, please call:
Kallung Handis at (352) 331-619/ (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & \Bigcup \$43.75 Filing Fee & \Bigcup \$52.50 Filing Fee,  Certificate of Status & Certified Copy & Certificate of Status & Certified Copy & Certified C
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

Tallahassee, FL 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 of State:	
	Scibel Acceptance Coupany	2005 2005
SECOND:	The document number of the corporation (if known): le(alo 0 4 7 )	马岛
THIRD:	The date dissolution was authorized:	16 SHE
	Effective date of dissolution if applicable: 11-30-05 (no more than 90 days after dissolution file date)	FOR ATTE
FOURTH:	Adoption of Dissolution (CHECK ONE)	Ø #
	Dissolution was approved by the shareholders. The number of votes cast for diss was sufficient for approval.	olution
	Dissolution was approved by of the shareholders through voting groups.	11/30/05
	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	
	2	
	(voting group)	•••
	Signature: Darlene A. Seibell	
	(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)	
	DARIENE A Seibel	
	(Typed or printed name of person signing)	
	wife le	
	(Title of person signing)	P 17 12

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: Saihel Acceptance Corp.
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:
The owner of this port has
passed away. The corp is not in use any longs.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Kotheys Harrin
120 NW 1225t.
Gainesulle 72321007
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.
Darlene A. Seibel Darlene A. Seiler  Printed Name of the Person Filing  Signature of the Person Filing