## F52531

	(Requestor's Name)
<del></del>	(Address)
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	(Address)
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	(City/State/Zip/Phone #)
PICK-UF	P MAIL MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status

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T. Roberts APR 23 2007

## **COVER LETTER**

TO: Amendment Section

Division of Corporations
SUBJECT: HALE MCGEE AND ASSOCIATES, INC.
DOCUMENT NUMBER: F52531
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SHARON MCGEE BROCKENBROUGH
(Name of Contact Person)
HALE MCGEE AND ASSOCIATES LLC
(Firm/Company)
883 W GRANADA BLVD
(Address)
ORMOND BEACH, FL 32174
(City/State and Zip Code)
For further information concerning this matter, please call:
Sharon McGee Brockenbrough at ( 386 ) 672-6742
(Name of Contact 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 & □\$52.50 Filing Fee,  Certificate of Status Certified Copy (Additional copy is enclosed)  Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

FILED

Pursuant to of dissolutic	section 607.1403, Florida Statutes, this Florida profit corporation submits the following artigon:    Corporation   Corporation   Corporation
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	HALE MCGEE AND ASSOCIATES, INC.
SECOND:	The document number of the corporation (if known): F52531
THIRD:	The date dissolution was authorized: 12-15-06
	Effective date of dissolution <u>if applicable:</u> (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 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)
;	Signature: Clever of the Park Ref  (By a director, president of other officer - if directors of officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	Sharon McGee Brockenbrough
	(Typed or printed name of person signing)
	President
	(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.

Name of Corporation: HALE MCGEE AND ASSOCIATES, INC.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
Name and address of claimant.
How the claim is deemed to be a corporate liability.
Copy and date of all previous correspondence sent to above named corporation
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
883 West Granada Blvd.
Ormond Beach FL 32174

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

Sharon McGee Brockenbrough

Printed Name of the Person Filing