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## **COVER LETTER**

<b>TO:</b> Amendment Section Division of Corporations	
SUBJECT: Articles of Diss.	olution
DOCUMENT NUMBER: 646763	
The enclosed Articles of Dissolution and fee are sub-	mitted for filing.
Please return all correspondence concerning this matt	er to the following:
Muliwun Sullivan (Name of Contact Pe	
MCKEEVER INVESTME	NT CORP
(Firm/Compan	у)
203 21 Street (Address)	
Niceville, FL 32578 (City/State and Zip	
(City/State and Zip	Code)
For further information concerning this matter, please	call:
<u>Mul'wun Sullivan</u> at (_ (Name of Contact Person)	(Area Code & Daytime Telephone Number)
	,
Enclosed is a check for the following amount:	
Certificate of Status Certifie	nal copy is Certified Copy
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton 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:		
	MCKEEVER INVESTMENT CORPORATION		
SECOND:	The document number of the corporation (if known): 646763		
THIRD:	The date dissolution was authorized: 63008		
	Effective date of dissolution if applicable: 6/30/08  (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 antified to vote separately on the plan to dissolve:		
	The number of votes cast for dissolution was sufficient for approval by  (voting group)		
	(voting group)		
	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)		
	Maliwon Sullivan (Typed or printed name of person signing)		
	President (Title of person circuity)		

Filing Fee: \$35