H71750

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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations SUBJECT: Dissoultion of the Law Offices of Thomas G. Kane, P.A. **DOCUMENT NUMBER: H71750** The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Thomas G. Kane (Name of Contact Person) Kane Law Firm, P.A. (Firm/Company) P.O. Box 940206 (Address) Maitland, Florida 32794-0206 (City/State and Zip Code) For further information concerning this matter, please call: Thomas G Kane at (407) 616-3612 (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: \$35 Filing Fee \$\sum \$43.75 Filing Fee & \$\sum \$43.75 Filing Fee & \$\sum \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is **Certified Copy** enclosed) (Additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building

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:		
	The Law Offices of Thomas G. Kane, P.A.		
SECOND:	The document number of the corporation (if known): H71750		
THIRD:	The date dissolution was authorized: 12/31/2010		
	Effective date of dissolution if applicable: 1/1/2011 (no more than 90 days after dissolution)	n file date)	
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for dissolution	
	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		
		JIVISIO	
	(voting group)	VERSION FOR THE VERSION FOR TH	
·. `.	Signature:	ORFORATIONS ORFORATIONS	
	(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)		
	Thomas G. Kane		
	(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: Thomas G. Kane, P.A. 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: Name, phone number and address of the claimant and the claimant's representative, a complete statement of all facts giving rise to the claim, including but not limited to the date & place the claim accrued, the date any notice was given to the corporation, the date the claimant alleges they knew of the claim, the total dollar amount of the claim or any nonmonetary relief sought, whether the claim is founded in tort or contract law, and any statute or case law relied on to make the claim. Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Thomas G Kane P.O. Box 940206 Maitland, FL 32794-0206 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. Thomas G. Kane

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

Printed Name of the Person Filing