H80024

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

March 15, 2002

Hackberry Hammock
8590 Germany Canal Rd.
Ft. Pierce, FL 34987

SUBJECT: HACKBERRY HAMMOCK NURSERY, INC.   6000005190826---1
Ref. Number: H80024   -04/04/02--01017--003
                                                  *****35.00 *****35.00

We have received your document for HACKBERRY HAMMOCK NURSERY, INC.. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The fee to file articles of dissolution or a certificate of withdrawal is $35. Certified copies are optional and are $8.75 for the first 8 pages of the document, and $1 for each additional page, not to exceed $52.50.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6901.

Susan Payne
Senior Section Administrator   Letter Number: 802A00015664

RECEIVED 02 APR -2 PM 12:15 DIVISION OF CORPORATIONS

FILED 02 APR -2 PM 3:18 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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Spayne
4/4/02

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 is:___HACKBERRY HAMMOCK NURSERY, INC.___

SECOND: The date dissolution was authorized:___FEBRUARY 28, 2002___

THIRD: 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 vote of 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)

Signed this ___12ᵗʰ___ day of ___March___, ___2002___.

Signature ___Samuel P Comer___
(By the Chairman or Vice Chairman of the Board, President, or other officer)

___SAMUEL P. COMER___
(Typed or printed name)

___PRESIDENT___
(Title)