H97567

(Re	equestor's Name)	
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(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

Diss. W/Notice

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JUL 28 2009

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Dissolution of Shady (Oaks, Inc.
DOCUMENT NUMBER: H97567	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Dissolution and i	fee are submitted for filing.
Please return all correspondence concernin	ng this matter to the following:
John E. Newman	
(Name of	Contact Person)
Shady Oaks, Inc.	
(Firm/Company)	
P.O. Box 15489	
(Address)	
Panama City, Florida 32406-54	89
· · · · · · · · · · · · · · · · · · ·	ate and Zip Code)
For further information concerning this ma	atter, please call:
John Newman	at (_850)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amou	ınt:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & ✓\$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) Certificate of Status & 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

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:
	Shady Oaks Inc.
SECOND:	The document number of the corporation (if known): H97567
THIRD:	The date dissolution was authorized: June 1, 2009
	Effective date of dissolution <u>if applicable:</u> June 30, 2009 (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
	7AL 20
	SECRETARY ALLAHASSES (voting group)
	WL 27 PH HASSEE.F
	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)
	John E. Newman, Vice-President & Treasurer
	(Typed or printed name of person signing)
	Vice-President & Treasurer
	(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.

Shady Oaks Inc.

Name of Corporation:
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:
Proof of services or material rendered, including signed receipt by authorized
officer, dated, & addressed to the corporation at the appropriate address.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Shady Oaks, Inc.
c/o John Newman
P.O. Box 15489
Panama City, Florida 32406-5489

John E. Newman, Vice-President

within 4 years after the filing of this notice.

Printed Name of the Person Filing

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

Signature of the Person Filing

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced