

J84794

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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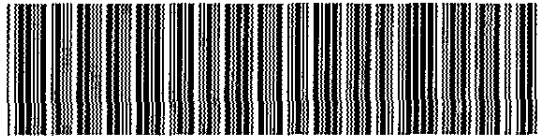
(Business Entity Name)

(Document Number)

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RECEIVED
03 FEB 21 PM 12:59
DEPT. OF STATE
DIVISION OF
TALLAHASSEE, FLORIDA

FILED
03 FEB 21 PM 2:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dissolution

T BROWN FEB 21 2003

CT CORPORATION

February 21, 2003

Secretary of State, Florida
409 East Gaines Street
Tallahassee FL 32399

Re: Order #: 5792486 SO
Customer Reference 1:
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

TRI-LAKE DOE, INC. (FL)
Dissolution
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Ashley A Mitchell
Fulfillment Specialist
Ashley_Mitchell@cch-lis.com

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

ARTICLES OF DISSOLUTION

FILED
03 FEB 21 PM 2:15
SECRETARY OF STATE
TALLAH-SEE, FLORIDA

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation is: TRI-Lake Doe, Inc.

SECOND: The date dissolution was authorized: February 14, 2003

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.

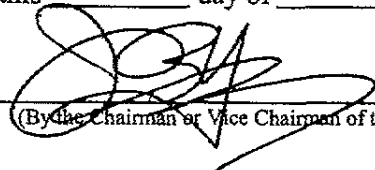
The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

Signed this 14th day of February, 2003

Signature _____


(By the Chairman or Vice Chairman of the Board, President, or other officer)

James B. Young

(Typed or printed name)

Vice President

(Title)