## J94035

(Requestor's Name)
(Address)
•
(Address)
,
(City/State/Zip/Phone #)
(Organizatione w)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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TALLAHASSEE, FI DAIL

## TRANSMITTAL LETTER

TRANSMIT	FAL LETTER  ROCIATES, INC.
TO: Amendment Section	是是一个 · ·
Division of Corporations	Entre la
	The state of the s
SUBJECT: DISSOLUTION OF NAJGER AND ASS	SOCIATES, INC.
DOCUMENT NUMBER: _J94035	<b>-</b>
The enclosed Articles of Dissolution and fee are	submitted for filing.
Please return all correspondence concerning this	matter to the following:
r touse return an correspondence concerning and	matter to the following.
DAME II CLONINA	
DAVID H. SLONIM  (Name of Person	))
,	"
WILLIAM A JOHNSON, PA	
(Name of Firm/	Company)
21 SUNTREE PLACE, SUITE 100	
(Add	(ress)
MELBOURNE, FL 32940	
	nd Zip Code)
The Configuration of the second of the secon	**
For further information concerning this matter, pl	ease call:
	at ( 321 ) 253-1667
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
<b>☑</b> \$35 Filing Fee □ \$43.75 Filing Fee & □ \$4:	3.75 Filing Fee & 🗖 \$52.50 Filing Fee,
Certificate of Status Cer	tified Copy Certificate of Status &
·	ditional copy is Certified Copy (Additional copy is
еп	closed) (Additional copy is enclosed)
MAILING ADDRESS:	,
Amendment Section	STREET ADDRESS: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	409 E. Gaines Street
Tallahassee, Florida 32314	Tallahassee, Florida 32399

## 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 Department of St	ate:
	NAJGER AND ASSOCIATES, INC	_
SECOND:	The document number of the corporation (if known): J94035	<u></u>
THIRD:	The date dissolution was authorized: 08/19/2004	_
	Effective date of dissolution if applicable: 08/20/2004 (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 was sufficient for approval.	east for dissolution
	☐ Dissolution was approved by of the shareholders through voting grou	ıps.
	The following statement must be separately provided for each voting vote separately on the plan to dissolve:	group entitled to
	The number of votes cast for dissolution was sufficient for approval	by
	SHARON T. NAJGER	_
	(voting group)	
	Signed this	•
Signatı	(By a director, president or other officer - if directors or officers have not been selected, by an if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	n i neorporator —
	SHARON T. NAJGER	
	(Typed or printed name of person signing)  (Typed or printed name of person signing)  (Title of person signing)	04 SEP -2 SECRETARY ALLAHASS

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.

ame of Corporation: NAJGER AND ASSOCIATES, INC.
ate of dissolution will be the date the dissolution is filed with the Department of State or as pecified in the Articles of Dissolution.
escription of information that must be included in a claim:
DISSOLUTION DUE TO THE DEATH OF WILLIAM NAJGER.
failing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
240 PROVINCIAL DR.
INDIALANTIC, FL 32905
claim against the above named corporation will be barred unless a proceeding to enforce the claim commenced within 4 years after the filing of this notice.
HARON T. NAJGER / //ajgul
Printed Name of the Person Filing Signature of the Person Filing

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