K59073

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300143454973

02/16/09--01012--009 **52.50

no FFB 16 PM 1: 22

ALL DISS 102/11/09

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Rondack, Inc.	
DOCUMENT NUMBER: K59073	
The enclosed Articles of Dissolution and fee are submitted for	or filing.
Please return all correspondence concerning this matter to the	e following:
Cynthia M Lybrand	
(Name of Contact Person)	
C M Lybrand & Co	
(Firm/Company)	
	Division (Con union)
(Address)	CARROLL COLORS AND COL
New Smyrna Beach, FL 32168-6903	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Cynthia M Lybrand at (386	428-2315
	Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\bigs\\$43.75 Filing Fee & \$\bigs\\$43.75 Filing Certificate of Status Certified Copy (Additional copenclosed)	
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:

	Rondack, Inc.		
SECOND:	The document number of the corporation (if known): K59073		
THIRD:	The date dissolution was authorized: 12/31/2008		
	Effective date of dissolution <u>if applicable:</u> 12/31/2008 (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 to was sufficient for approval.	for dissol	ution
	Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting group ento vote separately on the plan to dissolve:	ntitled	
	The number of votes cast for dissolution was sufficient for approval by		
	(voting group)	09 FEB 16	DIVISION OF COR
\$	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)	PH 1: 22	Y OF STATE CORPORATIONS
	Richard A Weaver		
	(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: Rondack, Inc.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
ALL PERTINENT INFORMATION RE: CLAIM INCLUDING DETAILS OF
DATES, MATERIALS OR LABOR FURNISHED TO THE CORPORATION
AND THE PROPERTY LOCATION WHERE MATERIALS OR LABOR WERE
PROVIDED AND THE EXACT NATURE OF THE CLAIM AND ANY OTHER
INFORMATION REQUESTED BY THE CORPORATION TO VERIFY CLAIM
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
C M LYBRAND & CO LLC
728 CANAL STREET
NEW SMYRNA BEACH, FL 32168-6903
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.
Olla Whan
Richard A. Weaver 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