L07673

(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



400198363094

03/21/11--01016--011 **43.75

W vun



de 3000

COVER LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: Pissolution of Corporation
DOCUMENT NUMBER: L 07673
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
Theo Two Colp (Firm/Company)
(Firm/Company)
(Address) (Address) (City/State and Zip Code)
(Address)
Quines ville fl. 32607
(City/State and Zip Code)
For further information concerning this matter, please call:
Con Thesharis at (352) 375-2696 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigsquare \text{\$43.75 Filing Fee & \$\bigsquare \text{\$52.50 Filing Fee,} \\ Certificate of Status & Certified Copy & Certified Copy \\ (Additional copy is \\ enclosed) & (Additional copy is \\ enclosed) \$52.50 Filing Fee, \\ Certificate of Status & \\ Certified Copy \\ (Additional copy is \\ enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:
	Theo Two Corp.
SECOND:	The document number of the corporation (if known): L07673
THIRD:	The date dissolution was authorized: May 1, 2011
	Effective date of dissolution if applicable:
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
	Theohan's family (voting group)
	(voting group)
	Signature: 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 that fiduciary)
	CON Theoharis
	(Typed or printed name of person signing)
	Director
	(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: Theo Two Corp.
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:
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Walling address where claims can be sent. (Claims cannot be sent to the Division of Corporations)
Theo Two Corp 4001 Newberry RD. B-3 Gainesville Fl. 32607
Community AD. B-3
<u>Vainesville 11. 3260/</u>
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.
Printed Name of the Person Filing Signature of the Person Filing
Printed Name of the Person Filing Signature of the Person Filing