

L11000108697

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

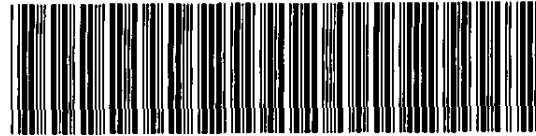
(Business Entity Name)

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GENERAL AFFIDAVIT

STATE OF FLORIDA

COUNTY OF DUVAL

BEFORE ME, THE UNDERSIGNED NOTARY, _____

ON THIS 22ND DAY OF SEPTEMBER, 2011, PERSONALLY APPEARED JOHN H. CORNTHWAITE, KNOWN TO ME TO BE A CREDIBLE PERSON AND OF LAWFUL AGE, WHO BEING BY ME FIRST DULY SWORN, ON HIS OATH, DEPOSES AND SAYS:

QALLANA, LLC, DOCUMENT NUMBER L07000088870, WHICH WAS DISSOLVED ON SEPTEMBER 16, 2011, HEREBY NOTIFIES ALL CONCERNED THAT QALLANA, LLC HAS NO INTENTION OF REVOKING THE DISSOLUTION, THEREFORE, RELEASING THE NAME FOR USE TO ANOTHER ENTITY.

SIGNED:  _____
SIGNATURE OF AFFIANT

NAME OF AFFIANT: JOHN H. CORNTHWAITE

ADDRESS OF AFFIANT: 5236 RIVER PARK VILLAS DR.

ST. AGUSTINE, FL 32092

STATE OF FLORIDA

COUNTY OF DUVAL

SWORN TO AND SUBSCRIBED BEFORE ME THIS 22ND DAY OF SEPTEMBER, 2011,

BY _____

SIGNATURE: _____

NOTARY PUBLIC – STATE OF FLORIDA

PRINT: _____

COMMISSIONED NAME OF NOTARY PUBLIC

PERSONALLY KNOWN _____ OR PRODUCED IDENTIFICATION _____

TYPE OF IDENTIFICATION PRODUCED _____