L55432

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



200263677042

09/29/14--01020--005 **10.00

08/28/14--01022--007 **25.00

Month

R. WHITE

SEP. 3 0 2014.



September 8, 2014

J WALDEN 2027 S ORANGE SARASOTA, FL 34329

SUBJECT: WALDEN GARLAND INTERNATIONAL, INC.

Ref. Number: L58432

We have received your document for WALDEN GARLAND INTERNATIONAL, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 414A00019069

Rebekah White Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: DISOLVE WALDEN GARLA	and International, Inc
DOCUMENT NUMBER: L58432	
The enclosed Articles of Dissolution and fee are submitted for	filing.
Please return all correspondence concerning this matter to the f	ollowing:
Jim Wolden	
(Name of Contact Person)	- 1
Name of Contact Person) Walden Garland (Firm/Company)	International Inc
2027 S. Onavge (Address)	
(Address) /	
SARASOTA FL 34329 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Tim Walden at (941) (Name of Contact Person) (Area Co	954-2266
	ode & Daytime Telephone Number)
Enclosed is a check for the following amount:	
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fe	
Certificate of Status Certified Copy (Additional copy)	Certificate of Status & Certified Copy
(Additional copy enclosed) MAILING ADDRESS: Antendment Section Division of Corporations	(Additional copy is
E CEL	enclosed)
Antendment Section	STREET ADDRESS: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	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:
	Walden GANDAND International, Inc
SECOND:	The document number of the corporation (if known): 158432
ΓHIRD:	The date dissolution was authorized: $8/15/2014$
	Effective date of dissolution if applicable: (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 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
	Jim Wolden
	(voting group)
	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
	Signature: (By a director, president or other officer - if directors or officers have not been selected,)
	an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	Jim Walter
	(Typed or printed name of person signing)
	VICE 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: Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. 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) 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