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SECRETARY OF STATE
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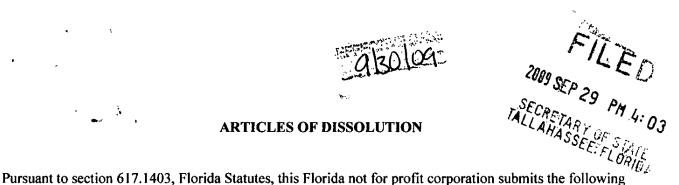
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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Dissolution	
DOCUMENT NUMBER: N 010000090	946
The enclosed Articles of Dissolution and fee a	re submitted for filing.
Please return all correspondence concerning thi	s matter to the following:
Kendall Thomas, Secretary	
(Name of Co Green Cove Springs Merchants As	ontact Person)
<u> </u>	Company)
401 Bay Street	
(Add	ress)
Green Cove Springs, FL 32043	
	nd Zip Code)
For further information concerning this matter,	please call:
Kendall Thomas	at (904 ) 529-9062
(Name of Contact Person)	(Area Code & DaytimeTelephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee  \$\sum \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  \$\$ Certificate of Status & Certified Copy (Additional copy is enclosed)
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: FIRST: The name of the corporation as currently filed with the Florida Department of State: Green Cove Springs Merchants Association, Inc. The document number of the corporation (if known): N 01000009046 SECOND: THIRD: Adoption of Dissolution (COMPLETE SECTION I OR II) SECTION I If the corporation has members entitled to vote: (CHECK/COMPLETE ONE) The date of the meeting of members at which the resolution to dissolve was adopted . The number of votes cast by the members was sufficient for approval. The resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes. **SECTION II** If the corporation has no members or members entitled to vote on the dissolution: The corporation has no members or members entitled to vote on the dissolution. The date of adoption of the resolution by the board of directors was Sep 11, 2009 The number of directors in office was 4 and the vote for resolution was

for and 0 against. (must be a majority vote)

FOURTH:	Effective date of dissolution if applicable: September $50$ , $20$
	(no more than 90 days after dissolution fil
	Signature Phyllip L Januar  (By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)
	Phyllis Vancas
	(Typed or printed name of the person signing)
	President
	(Title of person signing)

FILING FEE: \$35

\$ 43.75

AND CORF OF STATUS