

Art Dis  
@ 8/2/10

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Griffin Barrier Blackmon Griffin

**DOCUMENT NUMBER:** N090000067616

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Akelia Johnson

(Name of Contact Person)

Griffin Barrier Blackmon Griffin

(Firm/Company)

6611 Duval Ave.

(Address)

West Palm Beach, FL 33411

(City/State and Zip Code)

For further information concerning this matter, please call:

Akelia Johnson

(Name of Contact Person)

at ( 561 ) 308-9928

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☐ \$52.50 Filing Fee, 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

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

Griffin Barrier Blackmon Williams, INC.

SECOND: The document number of the corporation (if known): N09000006716

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 by 10/1/09. 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 \_\_\_\_\_.

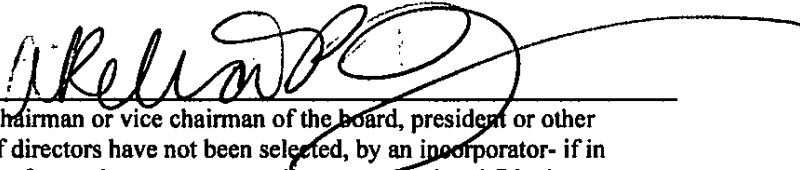
The number of directors in office was \_\_\_\_\_ and the vote for resolution was

\_\_\_\_\_ for and \_\_\_\_\_ against. (must be a majority vote)

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 JUL 30 AM 10:59

FOURTH: Effective date of dissolution if applicable: N/A  
(no more than 90 days after dissolution file date)

Signature

  
(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.)

Akelia Johnson

(Typed or printed name of the person signing)

Director

(Title of person signing)

**FILING FEE: \$35**