

N940000001869

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

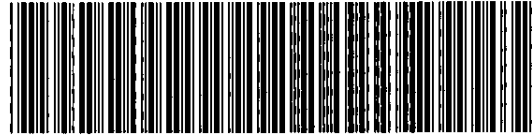
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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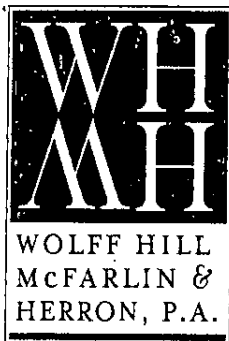
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05/31/11--01019--002 **70.00

*notice of
dissolution*

FILED
2011 MAY 31 AM 10:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*DR
6/6/11*



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by the American Board of Certification*

*** Certified Specialist in Consumer Bankruptcy Law
by the American Board of Certification*

† Also admitted in South Carolina

May 26, 2011

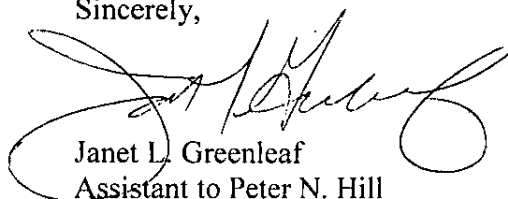
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Orlando Lutheran Academy, Inc.

Dear Sir/Madam:

Enclosed for filing please find the Notice of Corporate Dissolution (Unknown Claims) and Plan of Distribution of Assets, along with our firm trust account check # 6158 in the amount of \$70.00.

Sincerely,



Janet L. Greenleaf
Assistant to Peter N. Hill

JLG
Enclosures

ORLANDO LUTHERAN ACADEMY, INC.

FILED

2011 MAY 31 AM 10:02

NOTICE OF CORPORATE DISSOLUTION (UNKNOWN CLAIMS)

CLERK OF STATE
TALLAHASSEE, FLORIDA

This Notice is filed pursuant to section 617.1407(1)(a), Florida Statutes.

Orlando Lutheran Academy, Inc. (the "Company") filed Articles of Dissolution with the Florida Department of State. The Articles were filed on February 7, 2011. Dissolution was effective upon filing.

Persons having claims against the Company which are not known to the Company are requested to present them in accordance with this Notice. Claims must be sent to the Company's attorneys, as follows:

**Peter N. Hill, Esq.
Wolff, Hill, McFarlin & Herron, P.A.
1851 W. Colonial Drive
Orlando, FL 32804**

Claims must include the name and address of the Claimant, the amount claimed, and the legal basis for priority, if any, and must be signed by the Claimant, if an individual, or by an authorized officer or agent of the Claimant. Claimants should attach or enclose documentation in support of their claims. Claimants may use the claim form attached hereto.

Claims against the Company which are not known to the Company are
barred unless a proceeding to enforce the claim is commenced within 4 years
after the filing of this Notice.

ORLANDO LUTHERAN ACADEMY, INC.

By: David Duda
David Duda, President

In the Matter of the Corporate Dissolution of

ORLANDO LUTHERAN ACADEMY, INC.

PROOF OF CLAIM

Name of Creditor:

Address of Creditor:

Telephone number:

Amount of claim:

\$ _____

Nature of claim (e.g., goods sold, services performed, etc.):

Attach copies of any documents that support the claim.

DATE: _____	_____ Signature of Claimant
Print Name of Person Signing _____	_____ Title, if any

Address and Telephone Number (if different from above):