## P0000004720

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(
(Document Number)
(Cooding)
Certified Copies Certificates of Status
Corundado di Cambo
Special Instructions to Filing Officer:
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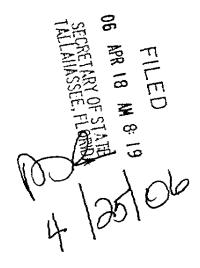
Office Use Only



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## **COVER LETTER**

TO: Amendment Section

Division of Corporations
SUBJECT: Barbara Chardon, PA
DOCUMENT NUMBER: P0000004720
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Barbara Chardon
(Name of Contact Person)
Barbara Chardon, PA
(Firm/Company)
12442 Green Stone Court
(Address)
Fort Meyers, FI 33913
(City/State and Zip Code)
For further information concerning this matter, please call:
Barbara Chardonat (_239) 768-1973
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigcip \\$43.75 Filing Fee & \bigcip \\$43.75 Filing Fee & \bigcip \\$52.50 Filing Fee,  Certificate of Status Certified Copy Certificate of Status & Certified Copy is enclosed)  (Additional copy is enclosed)  (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

FILED

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporations ubmits the following articles of dissolution:

	SECRETARY OF STATE TALLAHASSEE, FLORIDA
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	Barbara Chardon, PA
SECOND:	The document number of the corporation (if known): P0000004720
THIRD:	The date dissolution was authorized: 12-31-05
	Effective date of dissolution if applicable: 12-31-05  (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 of 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
	(voting group)
	Signature:  (By a director, president or other officer if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	Barbara Chardon
	(Typed or printed name of person signing)
	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 Cor	rporation: Barbara Chardon, PA	
	olution will be the date the dissolution is filed with the Department of State or as the Articles of Dissolution.	
Description of	of information that must be included in a claim:	
Name,	Address, and copmplete accounting Detail.	<del></del>
		<u> </u>
<del></del>		
		<del></del>
		<del></del> .
Mailing addr	ress where claims can be sent: (Claims cannot be sent to the Division of Corporations)	
	Barbara Chardon	
	12442 Green Stone Court	
	Fort Meyers, FL 33913	F
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	inst the above named corporation will be barred unless a proceeding to enforce the claim is co ars after the filing of this notice.	mmenced

Barbara Chardon

Printed Name of the Person Filing