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PICK-UP	☐ WAIT	MAIL
<u> </u>		,
(Bu	siness Entity Name)
(Document Number)		
Certified Copies Certificates of Status		f Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Dissolving Corporation
DOCUMENT NUMBER: P0000017289
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Catherine Beach
(Name of Contact Person)
Harbor Fithess, Inc.
(Firm/Company)
1086 Rane Concourse Juitette
Bay Flandor Florida 33154 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (786) 267-4150 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$52.50 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed) Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations STREET ADDRESS: Amendment Section Division of Corporations

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
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 on:
oi dissoluti	The name of the corporation as currently filed with the Florida Department of State:
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
SECOND:	The document number of the corporation (if known): P0000017259
THIRD:	The date dissolution was authorized: 2 5 - 200 7
	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
	Shorm Beach X X Stelle Breeds
	(voting group) X Affiling My
	Signature: (By a director, president or other officer - If directors or officer have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	Typed or printed name of person signing)
	Vice Pres
	(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: Harbor Finess, Inc.
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:
* all information planse.
or as much provided.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
1086 Kane Concause
Bay harbor, FL. 33154
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.
Catherine Boals - The
Printed Name of the Person Filing Signature of the Person Filing