

14-MAY-2004 11:45AM

FROM-AKERMANN SENTERFITT

(904) 798-3700

F-725

P.001.003

F-003

P00000034777

Florida Department of State
Division of Corporations
Public Access System

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From:

Account Name : AKERMANN, SENTERFITT OF JACKSONVILLE
Account Number : 105543000740
Phone : (904) 798-3700
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DIVISION OF CORPORATIONS

DISSOLUTION

NEST OF SAN MARCO, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF DISSOLUTION
OF
NEST OF SAN MARCO, INC.

These Articles of Dissolution are filed pursuant to Florida Statute Section 607.1403, to reflect a dissolution of Nest of San Marco, Inc., a Florida corporation (the "Corporation"), and in connection therewith, the undersigned officer, acting upon authority of the Board of Directors and Shareholders of the Corporation, hereby sets forth as follows:

1. The name of this Corporation is Nest of San Marco, Inc. The Corporation was assigned document number P00000034777.

2. The Articles of Dissolution of the Corporation was authorized on April 30, 2004.

3. Dissolution was approved by the Shareholders. The number of votes cast for dissolution was sufficient for approval.

4. Upon the filing of these Articles of Dissolution with the Florida Department of State, Nest of San Marco, Inc. shall be deemed to be dissolved accordingly.

Signed this 30 day of April, 2004.

NEST OF SAN MARCO, INC.

By: 
Larry Wilson, President

04 MAY 14 PM 2:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: NEST OF SAN MARCO, 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:

1. Name of Claimant: _____
2. Alleged Amount Owed: _____
3. Name, Address and Telephone Number of Contact Person for Claimant: _____
4. Any Documentation to Support Claim of Amount Owed _____

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

1951 Largo Road
Jacksonville, Florida 32207

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.

Terry A. Moore
Printed Name of the Person Filing

 v. a
Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00

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