

P00000036661

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

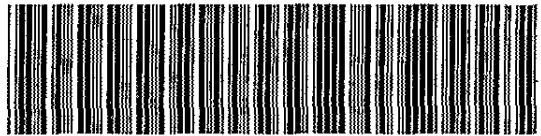
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/05/04--01005--002 **35.00

04 JAN -2 PM 2:10
SECRETARY OF STATE
TALLAHASSEE, FL 32301

FILED

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION OF READ ENTERPRISES, INC

DOCUMENT NUMBER: P 000 000 36661

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

Please return all correspondence concerning this matter to the following:

MARSHALL READ
(Name of Person)

READ ENTERPRISES, INC
(Name of Firm/Company)

669 SAND ISLES CIR
(Address)

PONTE VEDRA BEACH, FL 32082
(City/State/and Zip Code)

For further information concerning this matter, please call:

MARSHALL READ at (904) 819 0274 (HOME)
(Name of Person) (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, Florida 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

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

Read ENTERPRISES, INC.

SECOND: The document number of the corporation (if known): P00000036661

THIRD: The date dissolution was authorized: 11/7/03

Effective date of dissolution if applicable: 12/31/03
(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

(voting group)

Signed this _____ day of _____, _____.

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)

MARSHALL F. READ, JR.

(Typed or printed name of person signing)

DIRECTOR, V.P.

(Title of person signing)

Filing Fee: \$35

FILED
04 JAN -2 PM 2:10
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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: Read ENTERPRISES, 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:

VENDORS: DETAILED DESCRIPTION OF CLAIM, WITH INVOICE COPY IF APPLICABLE;
PROOF OF DELIVERY OF PRODUCT ON OR BEFORE 9/30/03.


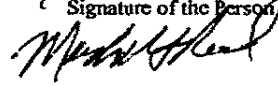
ALL OTHERS: DETAILED DESCRIPTION OF CLAIM, SHOWING DATE(S) CLAIM WAS
INCURRED, PROOF THAT THE CLAIM ^{LIABILITY} WAS NOT ASSUMED BY THE
CURRENT OWNERS OF THE FRANCHISE, AMOUNT OF CLAIM.

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

MARSHALL Read
669 Sand Isles Cir
PONTE VERA BEACH, FL 32082

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.

MARSHALL Read
Printed Name of the Person Filing


Signature of the Person Filing


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