

P00000054350

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

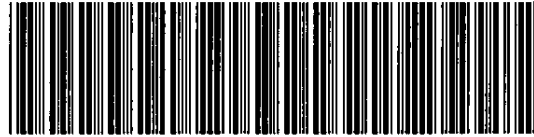
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

\$ 35

Refund *11.5



400067800074

04/06/06--90016--032 **150.00

FILED
06 JUN -5 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DISS. w/notice
y

5/15/06

Florida Dept of State
Division of Corp.
PO Box 6327
Tallahassee, FL 32314

Dear Sirs,

I wish to voluntarily dissolve the following corporation:

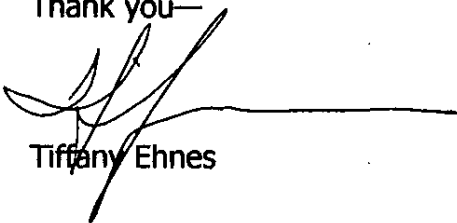
Whimsy Creations Inc.
Ref. Number: P00000054350

I have moved out of state. I have already paid for my annual report fee of \$150.
but I wish to have the \$35. dissolution fee taken from this amount and the
balance refunded.

My new address is:

Tiffany Ehnes
2149 N Skeenah Rd
Franklin, NC 28734

Thank you—



Tiffany Ehnes

DIVISION OF CORPORATIONS

06 MAY 19 AM 8:00

RECEIVED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 24, 2006

Tiffany Ehnes
2149 N. Skeenah Rd.
Franklin, NC 28734

SUBJECT: WHIMSY CREATIONS, INC.
Ref. Number: P00000054350

Articles of Dissolution must be completed to voluntarily dissolve the subject corporation. Enclosed is dissolution information.

As you requested, the filing fee of \$35 will be taken from the \$150 originally deposited for the annual report and a refund of \$115 will be issued. Please allow at least 60 days for the refund to be processed.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6901.

Susan Payne
Senior Section Administrator

Letter Number: 706A00035877

RECEIVED
06 JUN -5 AM 8:00
DIVISION OF CORPORATIONS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Articles of Dissolution

DOCUMENT NUMBER: Ref No: P00000054350

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

Please return all correspondence concerning this matter to the following:

Tiffany Ehnes

(Name of Contact Person)

Whimsy Creations Inc.

(Firm/Company)

2149 N. Skeenah Rd

(Address)

Franklin, NC 28734

(City/State and Zip Code)

For further information concerning this matter, please call:

Tiffany Ehnes

(Name of Contact Person)

at (828) 524-3220

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

**monies
(already on file)*

- ☒ \$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, FL 32314

STREET ADDRESS:

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 of dissolution:

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

Whimsy Creations, Inc.

SECOND: The document number of the corporation (if known): P00000054350

THIRD: The date dissolution was authorized: 5-30-06

Effective date of dissolution if applicable: 5-30-06
(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

[Signature]
(voting group)

Signature: [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)

Tiffany Ehnes (maiden name Valla)
(Typed or printed name of person signing)

President

(Title of person signing)

FILED
06 JUN -5 AM 10:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Whimsy Creations, 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:

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

2149 N. Skeenah Rd.
Franklin, NC 28734

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.

Tiffany Ehnes
Printed Name of the Person Filing

Tiffany Ehnes
Signature of the Person Filing

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