## P00000H03581

(Requestor's Name)
(Address)
(Address)
•
(Address)
N.
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
, (Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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05/17/10--01012--005 \*\*25.00

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TO JUN-L AM 9: 29
SECRETARY OF STATE
AND AHASSEE ELGRID

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JUN 0 8 2010





## FLORIDA DEPARTMENT OF STATE Division of Corporations

May 20, 2010

DAWN R. SCHAUMAN SHARK SURVIVOR, INC. 131 DELMAR ST. MELBOURNE BEACH, FL 32951

SUBJECT: SHARK SURVIVOR, INC.

Ref. Number: P00000103581

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$10.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell Regulatory Specialist II

Letter Number: 010A00012819



## **COVER LETTER**

, , . . .

TO: Amendment Section

Division of Corporations	
SUBJECT: Shark Survivor, Inc Dissolution	
DOCUMENT NUMBER: P0000 0 103 58 1	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Dawn Schauman (Name of Contact Person)	
·	
Shark Survivor Inc (Firm/Company)	
(Firm/Company)	
131 Delmac St (Address)	
(Address)	
Melbourne Beach FL 32951 (City/State and Zip Code)	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Name of Contact Person) at (3a1) 951 8882 (Area Code & Daytime Telephone Number	
(Name of Contact Person) (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)  (Additional copy is enclosed)	
MAILING ADDRESS:  STREET ADDRESS:  Avoid to the Continue of Contin	
Amendment Section Amendment Section Division of Corporations Division of Corporations	
P.O. Box 6327 Clifton Building	
Tallahassee El 32314 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:
	Shack Survivor, Inc.
SECOND:	The document number of the corporation (if known): POOOD 10358/
THIRD:	The date dissolution was authorized:
	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
	Daws & Schauman A T
	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)
	Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35