## 200000116749

(Requestor's Name)	
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(Address)	_
(City/State/Zip/Phone #)	
(City/State/Zip/Priorie #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	٦
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations
SUBJECT: 6969 Development Corporation
DOCUMENT NUMBER: POODOD 116749
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Douglas Baker (Name of Contact Person)
Retz Baker, PA CPAs (Firm/Company)
1415 5. Washington Av (Address)
(Address)  Titusville, FL 32780  (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
at ()
(Name of Contact Person) at ()  (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
Stiling Fee Status Status Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed)  Status Statu
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:
	6969 Development Corporation
SECOND:	The document number of the corporation (if known): Pooooil 6749
THIRD:	The date dissolution was authorized: 12/31/2010
	Effective date of dissolution if applicable: 12 31 2010  (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
	shareholders (100 %) (voting group)
X <sub>s</sub>	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)
	Lou Mac Donaled (Typed or printed name of person signing)
	PRESIDENT
	(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: 6969 Development Corporation

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:

 date of transaction
authorizing party
 address
amount
description of transaction leading to claim

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

Manchous wood Dr					
EVANS Jo	HN H				
1702 S. W	Pashington Au				
Titusville	FL 32780				

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.

Lou Mac Donald
Printed Name of the Person Filing

Name of the Person Filing

Signature of the Person Filing

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