

PO1000080153

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

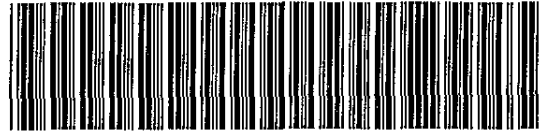
(Business Entity Name)

(Document Number)

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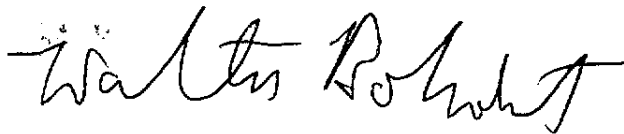
Walter Boholst  
President  
The Law Office of Walter C. Boholst, P.A.  
313 E. Tujunga Ave. Apt. K  
Burbank, CA 91502

Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Sir/Madam,

Please dissolve my corporation The Law Office of Walter C. Boholst, P.A. Thank you.

Sincerely,

A handwritten signature in cursive script that reads "Walter Boholst".

Walter Boholst  
818-848-1743

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 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 is: The Law Office of  
Walter C. Boholst, P.A.

SECOND: The date dissolution was authorized: 1/9/03

THIRD: 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 vote of 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 9 day of January, 2003.

Signature

Walter Boholst

(By the Chairman or Vice Chairman of the Board, President, or other officer)

Walter Boholst

(Typed or printed name)

President

(Title)

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