

PO1000096240

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

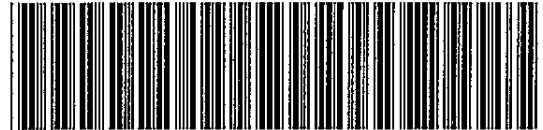
(Document Number)

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Certificates of Status \_\_\_\_\_

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

04 JUL 16 PM 4:23

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Diss

300 South Orange Ave  
Suite 1500  
Orlando, FL 32801

TELEPHONE  
407.244.7980

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WWW.COUNSELFOREMPLOYERS.COM

July 14, 2004

*Via US Mail*

Amendment Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

***Re: Filing Fee for Dissolution of Williams & Livingston***

To Whom It May Concern:

Enclosed please find CNL Bank check number 1455 made payable to Florida Department of State in the amount of forty-three dollars and seventy-five (\$43.75), representing payment of the Filing Fee and Certificate of Status for the Dissolution of Williams, Livingston & Associates, P.A. (Document # P01000096240). Enclosed please also find the Transmittal Letter and Articles of Dissolution.

If you should have any questions, comments or concerns please do not hesitate to contact me.

Sincerely,

Kinsley A. Elfand  
Office Administrator

Enclosure(s)

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Articles of Dissolution

**DOCUMENT NUMBER:** P01000096240

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

Please return all correspondence concerning this matter to the following:

Scott A. Livingston  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

360 Twelve Oaks Drive  
(Address)

Winter Springs, FL 32708  
(City/State/and Zip Code)

For further information concerning this matter, please call:

Scott Livingston at (407) 581-1764  
(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:

Williams, Livingston & Associates, P.A.

SECOND: The document number of the corporation (if known): PO1000096240

THIRD: The date dissolution was authorized: July 1, 2004

Effective date of dissolution if applicable: July 31, 2004  
(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 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 14<sup>th</sup> day of July, 2004

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)

Scott A. Livingston

(Typed or printed name of person signing)

Vice President

(Title of person signing)

**Filing Fee: \$35**

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA