

PD20000003974

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

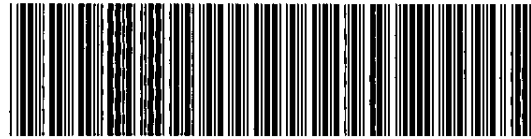
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000181248420

05/28/10--01015--006 \*\*35.00

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 MAY 28 AM 9:20

EFFECTIVE DATE

May 31, 10

Art Diss  
w/notice  
to 5/28/10

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** P and A Properties of Jax, Inc.

**DOCUMENT NUMBER:** P02000003974

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

Please return all correspondence concerning this matter to the following:

Lawrence E. Hayden, Jr., Esq.

(Name of Contact Person)

HAYDEN Law

(Firm/Company)

1301 Penman Rd., Suite F

(Address)

Jacksonville Beach, FL 32250

(City/State and Zip Code)

For further information concerning this matter, please call:

Lawrence E. Hayden, Jr., Esq. at ( 904 ) 247-9033

(Name of Contact 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, FL 32314

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

EFFECTIVE DATE  
May 31, 10

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:

P and A Properties of Jax, Inc.

SECOND: The document number of the corporation (if known): P02000003974

THIRD: The date dissolution was authorized: May 18, 2010

Effective date of dissolution if applicable: May 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

\_\_\_\_\_  
(voting group)

Signature: Audrey Ann Sciabarasi

(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)

Audrey Ann Sciabarasi

(Typed or printed name of person signing)

Director and President

(Title of person signing)

Filing Fee: \$35

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 MAY 28 AM 9:20

## 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: P and A Properties of Jax, 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:

Name, Address, and Phone Number of Claimant

Date, Location, and Nature of Claim

Amount of Claim

Narrative Description of Incident

Legal Basis for Claim

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

Audrey Ann Sciabarasi

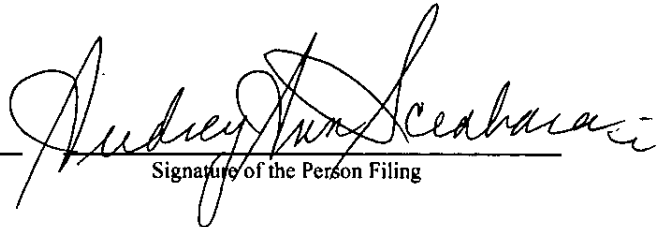
11728 Seaview Dr.

Jacksonville, FL 32225-1104

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.

Audrey Ann Sciabarasi

Printed Name of the Person Filing



Signature of the Person Filing

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