Paguss/9567

(Re	equestor's Name)	******		
(Ac	ldress)			
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06 DEC 28 PM 2: 03
SECRETARY OF STATE
ARTLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Dissolution of Hal Lac	ger Associates, Inc.
DOCUMENT NUMBER:	0
DOCUMENT NUMBER:	
The enclosed Articles of Dissolution and fee are sub	omitted for filing.
Please return all correspondence concerning this mat	ter to the following:
Hai Laeger	
Hal Laeger (Name of Contact P	erson)
Hal Laeger Assocrates, Duc. (Firm/Compar	ny)
1714 Baywood Drive (Address)	
(Address)	
Sarasota, FL 34231 (City/State and Zip	
(City/State and Zip	Code)
For further information concerning this matter, please	e call:
Hal La eger at ((Name of Contact Person)	941) 927-8355
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certific	S Filing Fee & S \$52.50 Filing Fee, ed Copy onal copy is ed) (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

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 Departm	ent of	State	:		
	Hal Laeger Associates, Inc.					
SECOND:	The document number of the corporation (if known): POZOOO11	956	.7			
THIRD:	The date dissolution was authorized: 12/20/06					
	Effective date of dissolution if applicable: 12/20/06 (no more than 90 days after dissolution)	olution f	ile date)		
FOURTH:	Adoption of Dissolution (CHECK ONE)					
	Dissolution was approved by the shareholders. The number of votes was sufficient for approval.	cast fo	or diss	solution		
	☐ Dissolution was approved by the shareholders through voting group	s.				
	The following statement must be separately provided for each voting great to vote separately on the plan to dissolve:	oup en	90	n milandi		
	The number of votes cast for dissolution was sufficient for approval by	RETARY AHASSE	DEC 28			
	·	E C	PM			
	(voting group)	STATE	2: 03	U		
	Signature: (By a director, president of other officer - if directors or officers have not been selected an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary that fiduciary)	i, by y, by				
	Hal Laeger (Typed or printed name of person signing)					
	President					
	(Title of person signing)					

Filing Fee: \$35