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PICK-UP	☐ WAIT	MAIL.
		
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Certified Copies	_ Certificates	of Status
		
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Special Instructions to	Filing Officer:	
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DIVISION OF CORPORATIONS

B. Total ANE 2.1 700

COVER LETTER

Division of Corporations	
SUBJECT: DISSOLUTION OF CORPORAS	TION
DOCUMENT NUMBER: PO 2 0000 77 135	<u> </u>
The enclosed Articles of Dissolution and fee are submitted for	or filing.
Please return all correspondence concerning this matter to the	following:
ROUALD STARK (Name of Contact Person)	
(Name of Contact Person)	
CROWN JEWSE OF STURET 100 (Firm/Company)	
(Firm/Company)	_
3291 SE FEDERM HIGHWAY (Address)	
(Address)	
C 7. 3.4003	
STUART FL. 34997 (City/State and Zip Code)	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
P. 14 5 GARN 00 (77)	1 2 FF- 24 Ch
(Name of Contact Person) at (772 (Area C	code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
	Certificate of Status &
(Additional copy	
enclosed)	(Additional copy is enclosed)
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	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 Department of	State:	•		
	CROWN TOWSL OF STUART INC				
SECOND:	The document number of the corporation (if known): Po 20007713	5	· • · · · · · · · · · · · · · · · · · ·		
THIRD:	The date dissolution was authorized: Aug 10 2006				
	Effective date of dissolution if applicable: (no more than 90 days after dissolution to	ile date)			
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes cast f was sufficient for approval.	or diss	solution	*	
	Dissolution was approved by the shareholders through voting groups.				
	The following statement must be separately provided for each voting group ento vote separately on the plan to dissolve:	90	OIV.S		
	The number of votes cast for dissolution was sufficient for approval by	AUG G	ECRET		
	Ranned & MARY STARK (voting group)	10 PH 2:	FILEU ARY OF STATE F CORPORATIONS		
		<u>রে</u> ও	TE		
	Signature: Brall Stark	٠.	** - ~· —		
	(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)				
	RONARD STARK	**		-	
	(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. CROWN STOUTE OF STUAKEN /NC Name of 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: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 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.

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