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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Blooming Freedom Too, Inc.	
DOCUMENT NUMBER: P02000106215	
The enclosed Articles of Dissolution and fee are submi	itted for filing.
Please return all correspondence concerning this matter	to the following:
Cristina Pardo	
(Name of Contact Pers	son)
Blooming Freedom Inc.	
(Firm/Company)	
3855 SW Honey Terrace	
(Address)	
Palm City, FL 34990	
(City/State and Zip C	ode)
For further information concerning this matter, please c	all:
Cristina Pardo at (7	72) 263-1160
at \	Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
□\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 F Certificate of Status Certified (Additional enclosed)	al copy is Certified Copy
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

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ARTICLES OF DISSOLUTION FILE [

Pursuant to of dissolution	section 607.1403, Florida Statutes, this Florida profit corporation submissible following articles
	SECRETARY OF STATE TABLAHASSEE, FLORID:
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	Blooming Freedom Too, Inc.
SECOND:	The document number of the corporation (if known): P02000106215
THIRD:	The date dissolution was authorized: 06/04/10
	Effective date of dissolution if applicable: (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
	Director
	(voting group)
	Signature: (By a director, president of other officer of 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)
	Cristina Pardo
	(Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35