P03000036873

(Re	equestor's Name)	
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(C i	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bı	isiness Entity Name	e)
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Certified Copies	_ Certificates	or Status
		 -
Special Instructions to	Filing Officer:	
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Office Use Only



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TO: Amendment Section Division of Corporations

SUBJECT: <u>CREBRATION HOME AND GARDEN PROPERTY</u> MANAGEMENT CORP.
DOCUMENT NUMBER: <u>P030000 36873</u>
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
NICHOLAS J. HORTON (Name of Contact Person)
CELEBRATION HOME AND GARDEN PROPERTY MANAGEMENT (Firm/Company) CORP.
9012 SHAWN PARK PLACE (Address)
ORLANDO GLORIDA 32819 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (407) 574 5741 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\to\$ \$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Amendment Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Q. . .

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:		
CELEBA	PATION HOME + GARDEN PROPERTY MANAGEMENT CORP		
SECOND:	The document number of the corporation (if known): Po3000036873		
THIRD:	The date dissolution was authorized: $3/5/2010$		
	Effective date of dissolution if applicable: 3/5/2010. (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 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)		
·			
	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)		
	NICHOLAS T. HORTON. (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.

Name of Corporation: CEZES RATION Home of CARDEN PLOISITY MANAGEMENT CORP.

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)

9012 SHOWN PARK PLACE

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.

NICHOLAS HORTON N-TC-HoxPrinted Name of the Person Filing Signature of the Person Filing