P03000037420

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City) States Expir Tions II)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700249819807

09/23/13--01014--012 **35.00

FILED
13 SEP 23 PM 5: 18
SECRETARY OF STATE
ORDER

_1.

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: <u>Corporate</u> T	Dissolution
DOCUMENT NUMBER: P0300	0037420
The enclosed Articles of Dissolution and fee	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
margarel mc Laug	hlin Intact Person)
Margaret mc Laug (Name of C Firm/	ery Inc. Company)
P.O. BOX 1401	dress)
Hernando, Floria (City/State	1a 34436 and Zip Code)
For further information concerning this matter	er, please call:
Margaret mc Laughlin (Name of Contact Person)	at (352) 726-880 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount	t: See 18
S35 Filing Fee □ \$43.75 Filing Fee & C Certificate of Status	\$43.75 Filing Fee & \$\simeg \text{\$\subseteq} \t
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section Division of Corporations	Amendment Section 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: 3 Abulous 7 Lowers Onc.
SECOND: THIRD:	The document number of the corporation (if known): PO300037420 The date dissolution was authorized: 8/33/13 Effective date of dissolution if applicable: 10/1/13 (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
	Signature: (By a director, president oxother 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) (By a director, president oxother officer - if directors or officers have not been selected, by that fiduciary) (By a director, president oxother officer - if directors or officers have not been selected, by that fiduciary) (By a director, president oxother officer - if directors or officers have not been selected, by that fiduciary) (By a director, president oxother officer - if directors or officers have not been selected, by that fiduciary) (By a director, president oxother officer - if directors or officers have not been selected, by that fiduciary)
	(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: 7 abulous 7 lowery In.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
Not Applicable
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
not applicable
SECRETARIANS ALLAHASS
TARY OF TARY OF
A claim against the above named corporation will be barred unless a proceeding to enforce the claims commenced within 4 years after the filing of this notice.
Printed Name of the Person Filling Signature of the Person Filling