

P03000043169

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000035552 3)))



H070000355523ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

RECEIVED

07 FEB -8 AM 8:00

DIVISION OF CORPORATIONS

Division of Corporations
Fax Number : (850) 205-0380

From:

Account Name : UPCHURCH, BAILEY & UPCHURCH, P.A.
Account Number : 075350000207
Phone : (904) 829-9066
Fax Number : (904) 825-4862

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 FEB -8 PM 2:46

FILED

DISSOLUTION OR WITHDRAWAL

JAMES HAYS APPRAISER, INC.

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$52.50

Electronic Filing Menu

Corporate Filing Menu

Help

VD

FILED

2007 FEB -8 PM 2:46
Audit #H07000035552 3

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION

FOR JAMES HAYS APPRAISER, INC.

Pursuant to the provisions of Section 607.1402, Florida Statutes (2006), the undersigned hereby adopts the following Articles of Dissolution:

1. The name of the corporation is JAMES HAYS APPRAISER, INC., and its Articles of Incorporation were filed on April 17, 2003.
2. The Board of Directors recommended this dissolution to the shareholders, and it was authorized by unanimous vote of the shareholders on January 17, 2007.
3. The number of shareholder votes cast for dissolution was sufficient for approval.

Executed on this 7th day of February, 2007.

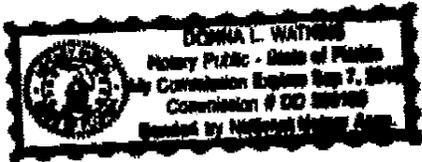
By: James Hays
Its President

STATE OF FLORIDA

COUNTY OF ST. JOHNS

THE FOREGOING INSTRUMENT was acknowledged before me this
11th day of February, 2007, by JAMES HAYS, as President of JAMES
HAYS APPRAISERS, INC., who: (notary must check applicable box)

- is personally known to me.
- produced current driver's license(s) as identification.
- produced _____ as identification.



Donna L. Watkins
Signature of Notary

Name of Notary Typed, Printed or Stamped

My Commission Number: _____

My Commission Expires: _____