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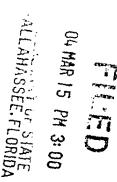
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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: SAM'S Certified Auto.
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Samuel R. Tedder (Name of Person)
·
SAM'S Certified Auto (Name of Firm/Company)
3621 CR 218 (Address)
Middleburg 41 32068 (City/State/and Zip Code)
For further information concerning this matter, please call:
SAMUEL Teddey at (904) 291-2264 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\text{\$\sqrt{3.75}\$ Filing Fee & Certificate of Status & Certified Copy (Additional copy is enclosed) \$\text{\$\sqrt{2.50}\$ Filing Fee, Certified Copy (Additional copy is enclosed)}\$
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, Florida 32314Tallahassee, Florida 32399

## ARTICLES OF DISSOLUTION

of dissolution	section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles in:
FIRST:	The name of the corporation as currently filed with the Department of State A SS SAMS CORFIFED Auto Repair, Inc. 855 55
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized: 3/3/64 S
	Effective date of dissolution if applicable: 33104 (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  Samuel Ray Teddon. (No Shaneholdon.)  (voting group)
	Signed this 3 day of March 2004
Signat	(By a director, president or other officer - if directors or officers have not been selected, by an i ncorporator - if in the hands of a receiver, justee, or other court appointed fiduciary, by that fiduciary)
	SAMUELT, Tedder (Typed or printed name of person signing)
	(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. 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