

PO3000048149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

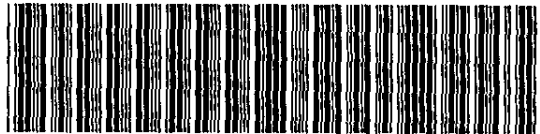
(Document Number)

Certified Copies

Certificates of Status

Special Instructions to Filing Officer:

Office Use Only



200070043422

VD

FILED  
06 APR 11 PM 3:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EB:ghens APR 17 2008

ACCOUNTING AND TAX SERVICES

**HENRY R. DOWD, E.A.**

23110 STATE ROAD 54, #317  
LUTZ, FLORIDA 33549

PHONE: 813.996.5322  
FAX: 813.996.5538  
E-MAIL: hrdowd@tampabay.rr.com

Wednesday, March 15, 2006

Florida Department Of State  
Division Of Corporations  
P.O. Box 6327  
Tallahassee, Fl 32314

Re: Articles Of Dissolution of - KENNA L FABER PA.

Please file the enclosed articles of Dissolution for KENNA L FABER PA  
with an effective date of March 15<sup>th</sup>, 2006.

Also enclosed is our check for \$43.75 to cover the basic filing fee and a certified copy for which  
we have included the \$8.75 additional fee. If you encounter any problems with this filing please  
call me, Henry R. Dowd, at (813)996-5322

Please return a certified copy of the Articles Of Dissolution to the following address:

KENNA L FABER  
304 CAGLE COVE ROAD  
SYLVA, NC 28779

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** KENNA L FABER P.A.

**DOCUMENT NUMBER:** P03000048149

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KENNA L FABER

(Name of Contact Person)

KENNA L FABER PA

(Firm/Company)

18611 BARTON AVENUE

(Address)

LUTZ, FL 33549

(City/State and Zip Code)

For further information concerning this matter, please call:

KENNA L FABER

(Name of Contact Person)

at ( 828 ) 631-4527

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee    ☒ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☒ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**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

## 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:

KENNA L FABER, P.A.

SECOND: The document number of the corporation (if known): P03000048149

THIRD: The date dissolution was authorized: MARCH 15TH, 2006

Effective date of dissolution if applicable: MARCH 15TH, 2006

(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)

KENNA L FABER

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

FILED  
06 APR 11 PM 3:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA