103000064670

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(Address)				
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D/With not

SECRETARY OF STATE OF CORPORATIONS OF CORPORATIONS

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Mt. Vernon Title Conjan
DOCUMENT NUMBER: PO300064670
The enclosed Articles of Dissolution and fee arc submitted for filing.
Please return all correspondence concerning this matter to the following:
Patsy Stereo
Name of Contact Person) Not Vernan Title Co
(Firm/Company)
7601 Bast Trearne Drive (Address)
North Boy Villages [-1 3-3/4] (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (205) But (2000) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
Certificate of Status Certificate of Status & Certified Copy (Additional copy is enclosed) 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

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 o	f State:
	Mt. Verron TiTle Congan	
SECOND:	The document number of the corporation (if known): Po 3000 6467	٥
THIRD:	The date dissolution was authorized: December 20, 2008	
. ' .	Effective date of dissolution if applicable: December 31, 2008 (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 east was sufficient for approval.	for dissolution
	Dissolution was approved by of the shareholders through voting groups.	
	The following statement must be separately provided for each voting group e to vote separately on the plan to dissolve:	ntitled .
	The number of votes cast for dissolution was sufficient for approval by	
	(voting group)	
		. , . , .
incline to		
S	ignature: (By a director, president or other officer - if directors or officers have not been selected, by	
A STATE OF S	an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by	
	and the second of the second o	
_	Chady C. Edwards	, •
•	(Typed or printed name of person signing)	•
	Vie-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. Mt. Verson TiTle Con Name of Corporation: 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) 7601 Each Treasure Onive Site 1709 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. Printed Name of the Person Filing Signature of the Person Filing