

PD3000066247

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

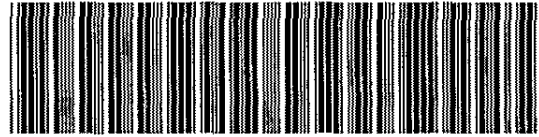
Certified Copies



Certificates of Status

Special Instructions to Filing Officer:

Office Use Only



500078930715

08/23/06--01005--023 \*\*43.75

*Voldis  
Thwib*

FILED  
06 AUG 23 PM 4:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CLOSE CORPORATION

**DOCUMENT NUMBER:** PO3000066247

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

Please return all correspondence concerning this matter to the following:

SAMANTHA LONGSTER

(Name of Contact Person)

IN AND OUT PERSONAL CHEFS CORP

(Firm/Company)

647 COKVINA DR

(Address)

DAVENPORT FL 33897

(City/State and Zip Code)

For further information concerning this matter, please call:

Samantha Longster

(Name of Contact Person)

at (407) 719 2403

(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  
IN AND OUT PERSONAL CHEFS CORP.

SECOND: The document number of the corporation (if known): P0300006624

THIRD: The date dissolution was authorized: 8/8/06  
Effective date of dissolution if applicable: 8/8/06  
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

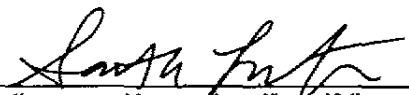
☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ 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

3 OF 3 DIRECTORS  
(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)

SAMANTHA LONGSTER  
(Typed or printed name of person signing)

OWNER - DIRECTOR  
(Title of person signing)

Filing Fee: \$35