## P0300074337

(Re	questor's Name)	
(Ad	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: DISSOIVE CORPORAtiON
DOCUMENT NUMBER: P0300074338 Feix65-1197244
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
BRUCE H. MORRISON
RUCE H. MORRISON  (Name of Contact Person)  RIVERBEND DEVELOPHENT TINC  (Firm/Company)
200 ASPHODEL DRIVE (Address)
Jothan, AL 36303 (City/State and Zip Code)
For further information concerning this matter, please call:
BRUCE H- MORRISON at (334) M94-4/755  (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\text{\$\subseteq}\$\$ \$\text{\$\subseteq}\$\$\$ \$\text{\$\subseteq}\$\$\$ \$\text{\$\subseteq}\$\$\$ \$\text{\$\subseteq}\$\$\$ \$\text{\$\subseteq}\$\$\$ \$\text{\$\subseteq}\$\$\$ \$\text{\$\subseteq}\$\$\$ \$\text{\$\subseteq}\$\$\$ \$\text{\$\subseteq}\$\$\$\$ \$\text{\$\subseteq}\$\$\$\$ \$\text{\$\subseteq}\$\$\$\$ \$\text{\$\subseteq}\$\$\$\$ \$\text{\$\subseteq}\$\$\$\$\$ \$\text{\$\subseteq}\$
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:
	RIVERBEND DEVELOPHENT, INC
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized: 8-2-2007
	Effective date of dissolution if applicable:  (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
	BRUCE H- HORRISON (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)
	PRUE H- HORNISON (Typed or printed name of person signing)
	PRESIDENT
	(Title of server 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