## 103000093946

(Red	questor's Name)		
. (Add	dress)		
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. (City	//State/Zip/Phon	e #)	
PICK-UP	WAIT	MAIL	
. (Bus	siness Entity Nar	me)	
(Doc	cument Number)	·	
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

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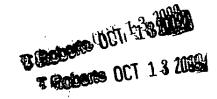
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## **COVER LETTER**

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations SUBJECT: \_\_Dissolution of HDYII, INC. DOCUMENT NUMBER: P03000093946 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: HARVEY D. YOST II (Name of Contact Person) Attorney at Law (Firm/Company) 114 West Hall of Fame Avenue, Suite 301 (Address) Stillwater, OK 74075-5227 (City/State and Zip Code) For further information concerning this matter, please call: HARVEY D. YOST II at ( 405 (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: \$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee & \$\$52.50 Filing Fee, Certificate of Status Certificate of Status & Certified Copy (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) MAILING ADDRESS: STREET ADDRESS: Amendment Section **Amendment Section Division of Corporations** Division of Corporations P.O. Box 6327 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 Sta		
	HDYII, INC.		
SECOND:	The document number of the corporation (if known): P03000093946		
THIRD:	The date dissolution was authorized: October 5, 2009		
	Effective date of dissolution if applicable: December 31, 2009  (no more than 90 days after dissolution file date)		
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Adoption of Dissolution (CHECK ONE)  X Dissolution was approved by the shareholders. The number of votes east for dissolution was sufficient for approval.  Dissolution was approved by the shareholders through voting groups.		
	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		
	N/A		
(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)		
	HARVEY D. YOST II		
	(Typed or printed name of person signing)		
	Chairman, Board of Directors		
	(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 140ace of Corporate Designation is optional and is not required when ming a voluntary dissolution.		
Name of Corporation: HDYII, INC.		
Date of dissolution will be the date the dissolution is filed was specified in the Articles of Dissolution.	vith the Department of State or as	
Description of information that must be included in a claim:		
Date, nature and amount of claim	n	
	·	
Mailing address where claims can be sent: (Claims cannot be	be sent to the Division of Corporations)	
HARVEY D. Y	OST II	
Attorney at	Law	
114 West Hall of Fame	Avenue, Suite 301	
Stillwater, OK	74075-5227	
A claim against the above named corporation will be barred within 4 years after the filing of this notice.	unless a proceeding to enforce the claim is commenced	
HARVEY D. YOST II	Signature of the Person Filing	
HARVEY D. YOST II Printed Name of the Person Filing	Signature of the Person Filing	