P03000098878

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cil	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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2008 HAY -9 AM II: 10
SECRETARY OF STATE

Dissolution

TB 5-15-08

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Dand M Enterprise of Palm Beach, Inc.
DOCUMENT NUMBER: P 03 0000 98878
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Ana H. Ruz
Name of Contact Person) D and M Enterprise of Polm Beach (Firm/Company)
innal Southern Pride Place
(Address) Wellington, FL 33449 (City/State and Zip Code)
For further information concerning this matter, please call:
And RUZ at (561) 313 - 7889 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$\frac{1}{2}\$
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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:	
	Dand M Enterprise of Palm Beach, Inc.	
SECOND:	The document number of the corporation (if known): POS 0000 98878	_
THIRD:	The date dissolution was authorized: $4/30/08$	_
	Effective date of dissolution if applicable: 4/30/08 (no more man 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.	01
	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	
	(voting group) ARY OF STATE SSEE, FLORIDA	
\$	(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)	
	(Typed or printed name of person signing)	
_	President.	
	(Title of person signing)	

Filing Fee: \$35