# 03000100717

(Re	questor's Name)	
(Ad	dress)	
· (Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300284357063

04/13/16--01003--006 \*\*25.00

05/04/16--01006--032 \*\*10.00

MAY 0 4 2016 C. CARROTHERS



April 19, 2016

GLENN MCINTYRE GLENN MCINTYRE HOMES INC 3520 BEAR BAY ROAD MYAKKA, FL 34251

SUBJECT: GLENN MCINTYRE HOMES, INC.

Ref. Number: P03000100717

We have received your document for GLENN MCINTYRE HOMES, INC. and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$10.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The attached form must be completed in order to file the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 016A00008016

Cathy A Carrothers Regulatory Specialist

www.sunbiz.org

## **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: ()	Solution a	JJ C		
	MBER: 2 0 300			
DOCUMENT NO	MBER O COO	0 100 11		
The enclosed Notice of Limited Liability Company Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Glenn	MC Inty re (Name of	Contact Person)		
Glenn n	acIntyre Ho	omes inc n/Company)		
3520 Bear Bay Rol (Address) Myakka FL 34251 (City/State and Zip Code)				
myakka	FL 34251			
(City/State and Zip Code)				
	ion concerning this mat	•	•	
_	•	•	724-1346 (Daytime Telephone Number)	
(Name of	Contact Person)	(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the following amount:				
\$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status		□ \$60 Filing Fee, Certificate of Status & sed) Certified Copy (Additional copy is enclosed)	
MAILING A			EET ADDRESS:	
Amendment Section Division of Corporations		Amendment Section Division of Corporations		
P.O. Box 63	•		on Building	
Tallahassee,	FL 32314	266	Executive Center Circle ahassee, 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:
	Chan MaIntire Homes Inc.
SECOND:	The document number of the corporation (if known): DU3000 100 217
THIRD:	The date dissolution was authorized:
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)
	Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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
	Clina MCInture
	(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)
	(Typed or printed name of person signing)
	(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.
Name of Corporation: Jun M. Intyp Homes
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:
Company dissaloution
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  Application of Corporations  Application of Corporation of Corporations  Application of Corporation
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