(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL
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### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 26, 2005

HOLLADAY ENTERPRISES, INC. 805 SW 9th St., Cir. Box 227 Boca Raton, FL 33486-5209

SUBJECT: HOLLADAY ENTERPRISES, INC.

Ref. Number: P04000034472

We have received your document for HOLLADAY ENTERPRISES, INC. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

We are returning your check for \$150.00 to be replaced by one in the correct amount of \$35.00.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6910.

Louise Flemming-Jackson Document Specialist Supervisor

Letter Number: 105A00028680

## TRANSMITTAL LETTER

Division of Corporations SUBJECT: \_ Dissolution of Corporation (Holladay Enterprises, Inc.) **DOCUMENT NUMBER:** P04000034472 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ray S. or Lillian M. Holladay (Name of Person) Holladay Enterprises, Inc. (Name of Firm/Company) 806 S. W. 9th Street Circle - Box 227 (Address) Boca Raton, Florida 33486-5209 (City/State/and Zip Code) For further information concerning this matter, please call: Lillian M. Holladay \_\_ at ( 561 ) 393-2804 or 469-241-0503 (Area Code & Daytime Telephone Number) (Name of 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 Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) MAILING ADDRESS: **STREET ADDRESS:** 

**TO:** Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

### ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution: All All All Son FIRST: The name of the corporation as currently filed with Department of State: Holladay Enterprises, Inc. The document number of the corporation (if known): P04000034472 SECOND: 02/23/04 Opene The file date of the articles of incorporation was: THIRD: 03/31/05 Closed FOURTH: (CHECK AT LEAST ONE BOX) None of the corporation's shares have been issued. The corporation has not commenced business. FIFTH: No debt of the corporation remains unpaid. SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued. SEVENTH: Adoption of Dissolution (CHECK ONE) A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution. 2005 Signed this 2nd day of 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.) Lillian M. Holladay (Typed or printed name of person signing) Secretary/Treasurer

Filing Fee: \$35

(Title of person signing)

# 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: Holladay Enterprises, Inc. Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Specified 03/31/05. Description of information that must be included in a claim: None expected, but if any: Name, amount, detailed description. Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 806 S. W. 9th Street Circle - Apt. #103 Boca Raton, Florida 33486-5209 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. Lillian M. Holladay Printed Name of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00