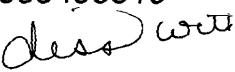
POH000092302

| (Re | questor's Name) | |
|---|---------------------|--------------|
| (Ad | dress) | |
| (Ad | idress) | |
| (Cit | y/State/Zip/Phone # |) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Name |) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates of | f Status |
| Special Instructions to Filing Officer: | | |
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02/03/06--01001--022 **10.00

notice

81/18/06-0103 ALLAMASSEE, FLORIDA

Office Use Only

X00678,00524,00671

COVER LETTER

| | tration Section ion of Corporations | | |
|---|-------------------------------------|--|------------------------------------|
| SUBJECT: | Cotcor Incorporated | | |
| _ | C. | Vame of Partnership) | |
| DOCUMENT | T NUMBER: PO400092 | 302 | |
| The enclosed | Statement of Dissolution for F | artnership and fo | ee(s) are submitted for filing. |
| Please return | all correspondence concerning | this matter to th | e following: |
| S | | | |
| Susan Co | | | |
| | (Name of Person) | | |
| Cotcor Inc | corporated | | |
| | (Firm/Company) | | |
| | | | • |
| 1760 S W | /. Cimarron Court | | |
| 1700 0.44 | (Address) | | |
| | (zidatess) | | |
| Palm City | , Florida 34990 | | |
| | (City/State and Zip Code) | | |
| For further in | formation concerning this matt | ter, please call: | |
| Susan Co | | _at (_772) | 219-9464 Daytime Telephone Number) |
| | (Name of Person) | (Arca Code &) | Daytime Telephone Number) |
| STREET ADDI Registration Sec Division of Corp | ction | MAILING ADDRESS: Registration Section | |
| Clifton Building | | Division of Corporations P.O. Box 6327 | |
| 2661 Executive Tallahassee, Flor | Center Circle | Tallahassee, Florida 32314 | |

CR2E070 (01/06)



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 23, 2006

Susan Coton Coton Incorporated 1760 S.W. Cimarron Court Palm Court, FL 34990

SUBJECT: COTCOR INCORPORATED

Ref. Number: P04000092302

We have received your document for COTCOR INCORPORATED 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 document that you submitted is for a partnership not a corporation. I have enclosed the correct form (Articles of Dissolution) that you may fill out and return to us. Please be sure to send an additional \$10.00 since the fee for Articles of Dissolution is \$35.00 instead of \$25.00.

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) 245-6907.

Annette Ramsey Document Specialist

Letter Number: 406A00004631

RECEIVED

06 FEB -1 AN B: 00

District of Comment of D.O. DOY COOK Wollahaman Warida 9991.

| ARTICLES OF DISSOLUTION TO |
|--|
| ARTICLES OF DISSOLUTION FEB |
| ARTICLES OF DISSOLUTION FEB. PM 4: 10 Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation Authority The following articles of dissolution: |
| FIRST: The name of the corporation as currently filed with the Florida Department of State: |
| Cot Car Incorporated |
| SECOND: The document number of the corporation (if known): Po 40000 92302 THIRD: The file date the articles of incorporation: June 16, 2004 |
| THIRD: The file date the articles of incorporation: June 16, 2004 |
| 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. |
| |
| 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.) |
| SUSAN COTON |
| (Typed or printed name of person signing) |
| Tresident |
| (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: Cotear Incorporated |
| 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: |
| nane |
| |
| |
| |
| |
| Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) |
| |
| 1760 J. W. Cemarun Ct Palm City Fl. 34990 |
| |
| |
| |
| 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. |
| \mathcal{L} |
| SUSAN COTON Susan Caton |
| Printed Name of the Person Filing Signature of the Person Filing |