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(Re	equestor's Name)	<u></u>
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(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)	<u> </u>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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03/15/07--01028--009 **35.00

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Dissolution of Corporation
DOCUMENT NUMBER: 607. 1403
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Roger A. Leginess (Name of Contact Person)
(Name of Contact Person)
Roger Laginess, Inc. (Firm/Company)
401 Eleventh St. (Address)
(Address)
St Augustine FL 32084 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Roger Laginess at (904) 810-5623
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\to\$ \$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: STREET ADDRESS:
Amendment Section Amendment Section

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

	THE LEDS OF		
Pursuant to of dissolution			
FIRST:	The name of the corporation as currently filed with the Florida Department of State: Roger Loginess, Inc.		
SECOND:	The document number of the corporation (if known):		
THIRD:	The date dissolution was authorized: $\frac{3}{12/07}$		
	Effective date of dissolution if applicable: (no more than 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.		
	☐ Dissolution was approved by of 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:		
٠.	The number of votes cast for dissolution was sufficient for approval by		
	(voting group)		
\$	Signature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the bands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)		
	Typed or printed name of person signing)		
	Tres Aont (Title of person signing)		

Filing Fee: \$35