## P05000011512

| (Re                     | equestor's Name)     |           |
|-------------------------|----------------------|-----------|
|                         |                      |           |
| (Ad                     | ldress)              |           |
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| (Ad                     | ldress)              |           |
|                         |                      |           |
| (Cit                    | ty/State/Zip/Phone   | #)        |
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| PICK-UP                 | MAIT                 | MAIL      |
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| - (Ru                   | siness Entity Nam    | <u>a)</u> |
| (50                     | Siliess Littly Natio | e,        |
|                         |                      |           |
| (Do                     | cument Number)       |           |
|                         |                      |           |
| Certified Copies        | Certificates         | of Status |
|                         |                      |           |
| Special Instructions to | Filing Officer       |           |
|                         | <b></b>              |           |
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Office Use Only



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DIVISION OF CORPORATIONS
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| TO: Amendment Section Division of Corporations  |  |
|---|--|
| SUBJECT: Dissolu  | ion  |
| DOCUMENT NUMBER: PO   | 5000011512   |
| The enclosed Articles of Dissolution and fe   | ee are submitted for filing.   |
| Please return all correspondence concerning   | g this matter to the following:  |
| Kathy (Name of G  | Marie Loftus Contact Person)   |
| •   | ectified Home Insportions  |
| 391873 Pros   | ddress)  |
|   |  |
| - tlilliard   | FE 33046<br>te and Zip Code)   |
| (City/Stat  | te and Zip Code)   |
| For further information concerning this mat   | tter, please call:   |
| (Name of Contact Person)  | -at (904) \$45-7151<br>(Area Code & Daytime Telephone Number)  |
| Enclosed is a check for the following amount  | nt:  |
| \$35 Filing Fee \$\times\$\$\$\$\$ \$\times\$\$\$\$ Certificate of Status                       | S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy enclosed) (Additional copy is enclosed) |
| MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301       |

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles

| of dissolution | on: _   |
|----------------|---|
| FIRST:         | The name of the corporation as currently filed with the Florida Department of State:  |
|                | The document number of the corporation (if known): PO50000115/2   |
| SECOND:        | The document number of the corporation (if known): PO 50000 115/2   |
| THIRD:         | The date dissolution was authorized: 4-30-0(a   |
|                | Effective date of dissolution if applicable: 4-30-06 (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 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   |
|                | $\mathcal{A} =$   |
|                | (voting group)  |
|                |   |
|                | Signature: Kathy Morie Roftes   |
|                | (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) |
|                | Kathy Marie Lattes  |
|                | (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.

| tate of dissolution will be the date the dissolution is filed with the Department of State or as pecified in the Articles of Dissolution. |  |  |
|---|--|--|
| escription o  | f information that must be included in a claim:  |  |
|   | Not enough husiness to support   |  |
| <del>, , , , , , , , , , , , , , , , , , , </del>   | Not enough husiness to support   |  |
|   |  |  |
| failing addr  | ess where claims can be sent: (Claims cannot be sent to the Division of Corporations)  |  |
|   | 391873 Prospect Garding De.<br>Hilliard FZ   |  |
|   |  |  |
|   | Hilliard FZ  |  |
|   | Hilliard FL = 3204/0 =   |  |
|   | Hilliard FZ = 3304/6 =   |  |
| . claim agair<br>ithin 4 year   | Ail/lard FL 3304/6  ast the above named corporation will be barred unless a proceeding to enforce the claim is comments after the filing of this notice. |  |
| claim agair<br>ithin 4 year   | 3304/6 = st the above named corporation will be barred unless a proceeding to enforce the claim is commen  |  |