## P05000013173

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

SUBJECT: Pinnacle Management & As	sociates, Inc.
DOCUMENT NUMBER: P05000013173	
The enclosed Articles of Dissolution and fee are su	abmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Jolene Bonner	
(Name of Contact	Person)
Pinnacle Management & Associates,	Inc.
(Firm/Comp	any)
1881 South Highway 17-92	
(Address)	
Longwood, FL 32792	
(City/State and Z	ip Code)
For further information concerning this matter, plea	se call:
Jolene Bonner at	(407) 226-1985 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
(Addi	75 Filing Fee & \$\sum \\$52.50 Filing Fee, fied Copy
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:

FIRST:	The name of the corporation as currently filed with the Florida Department	of State:			
	Pinnacle Management & Associates Inc				
SECOND:	The document number of the corporation (if known): P05000013173				
THIRD:	The date dissolution was authorized: 09/05/2008				
	Effective date of dissolution if applicable: 09/05/2008  (no more than 90 days after dissolution)	n file date)			
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes case was sufficient for approval.	t for disso	lution		
	Dissolution was approved by the shareholders through voting groups.				
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled			
	The number of votes cast for dissolution was sufficient for approval by				
	Jolene Bonner	380	SECF		
	(voting group)	)CT -	N.C.Y.		
		2	CORP		
	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)	08 OCT -2 PH 12: 49	OF STATE ORPORATIONS		
	Jolene Bonner				
	(Typed or printed name of person signing)				
	President				
	(Title of person signing)				

Filing Fee: \$35