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J. SHAVETS - JAN 0 7 2009

COVER LETTER

TO: Amendment Section Division of Corporations	
•	PROPERTY GOOD, INC
DOCUMENT NUMBER: POS	- 000026291
The enclosed Articles of Dissolution and fee	are submitted for filing.
Please return all correspondence concerning t	his matter to the following:
JAMES F.	YORK
(Name of Co	ontact Person)
SUNSTATI	E ADJISORY
· · · · · · · · · · · · · · · · · ·	Company)
621 NW 53	rd St. STE 240 ress)
BOCA LAT	ress)
For further information concerning this matte	المالين والمالين المالين المال
(Name of Contact Person)	at (561) 995 - 14425 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount	
Certificate of Status	\$43.75 Filing Fee &
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:	
	SUNSTATE PROPERTY CAME, I	Ne.	
SECOND:	The document number of the corporation (if known): $Po5-000$	0267	241
THIRD:	The date dissolution was authorized: 12/22/03		
	Effective date of dissolution if applicable: (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 cast was sufficient for approval.	for disso	olution
	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:	T 63	1 375 00 4
	The number of votes cast for dissolution was sufficient for approval by	DEC 29	1
	(voting group)	PH 3: 52	B (
	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)		
	JAMES F. YOAK		
	(Typed or printed name of person signing) PLESI DENT		
	(Title of person signing)		

Filing Fee: \$35