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R. WHITE

## **COVER LETTER**

TO: Amendment Section

Division of Corporations SUBJECT: Lake June West Golf & Athletic Club, Inc. P05000042311 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Pamela T. Karlson (Name of Contact Person) Karlson Law Group, P.A. (Firm/Company) 301 Dal Hall Blvd (Address) Lake Placid, FL 33852 (City/State and Zip Code) For further information concerning this matter, please call: Melissa Barlaug (Name of Contact Person) Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: □ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) MAILING ADDRESS STREET ADDRESS: Amendment Section Amendment Section Division of Corporations **Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

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 Lake June West Golf & Athletic Club, Inc.	of State:				
SECOND:	The document number of the corporation (if known): P05000042311					
THIRD:	Sentember 30, 2013					
	Effective date of dissolution if applicable: October 1, 2013  (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	olutio	n		
	Dissolution was approved by the shareholders through voting groups.					
	The following statement must be separately provided for each voting group of to vote separately on the plan to dissolve:	entitled	<b>*5</b>			
	The number of votes cast for dissolution was sufficient for approval by	TRETARY O	OCT -9	T. The state of		
	(voting group)	F STATE.	FH 2: 57	t		
	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)					
	Michael P. Chapman					
	(Typed or printed name of person signing)					
	President					
	(Title of person signing)					

Filing Fee: \$35

## **Notice of Corporate Dissolution**

This notice is submitted by the dissolved corp	poration named below	for resolution of pay	ment of unknown claims
against this corporation as provided in s. 607.			

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: Lake June West Golf & Athletic Club, Inc.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
Description of and date service rendered. Documentation supporting
claim, including but not limited to; invoices, contracts or other
evidence of agreement.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
139 Tower Street
Lake Placid, FL 33852
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.
Michael P. Chapman
Printed Name of the Person Filing  Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00