

P05000054008

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06 MAR -9 PM 3:00
TALLAHASSEE, FLORIDA

Ant Di'ss
10/3/20/06

Alison R. Reeder
600 44th Avenue North
St. Petersburg, FL 33703
(727)526-9337

March 5, 2006

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

Re: Articles of Dissolution for Alison R. Reeder, Inc.

Dear Sir/Madam:

Enclosed please find the following documents for filing with the Division of Corporations:

1. Original and one copy of the Articles of Dissolution for Alison R. Reeder, Inc.
2. Check in the amount of 35.00 to cover the cost of such filing.

Please send a conformed copy of the Articles of Dissolution to me once they have been filed. Thank you for your assistance. If you have any questions, please do not hesitate to contact me.

Sincerely,



Alison R. Reeder

Enclosures- Original and Copy of the Articles of Dissolution
Filing fee check

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:

Alison B. Reeder, INC.

SECOND: The document number of the corporation (if known): PD5000054008

THIRD: The date dissolution was authorized: MARCH 6, 2006

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:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

Signature: Alison Reeder
(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)

Alison Reeder
(Typed or printed name of person signing)

President
(Title of person signing)

Filing Fee: \$35

FILED
06 MAR -9 PM 3:00
TALLAHASSEE, FLORIDA