P05000098653

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	÷#)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status ▼
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations SUBJECT: Dissolution of Alley Gatorz Company DOCUMENT NUMBER: P05000098653 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Steven Perry (Name of Contact Person) Former Alley Gatorz Company (Firm/Company) 1440 Galena terrace (Address) Deltona Florida 32725 (City/State and Zip Code) For further information concerning this matter, please call: at (386 Steve Perry (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 & ▼\$52.50 Filing Fee, Certificate of Status Certificate of Status & Certified Copy (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) STREET ADDRESS: **MAILING ADDRESS:** Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 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:	
	Alley Gatorz Company	
SECOND:	The document number of the corporation (if known): P05000098653	
THIRD:	The date dissolution was authorized: November 12 2011	
	Effective date of dissolution <u>if applicable</u> : December 31st 2010 (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.	n
	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	3
	(voting group) SSEE, FLORID	#
	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)	
	Steven Perry	
	(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 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.
Name of Corporation: Alley Gatorz Company
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.
Description of information that must be included in a claim:
The former business Was Evicted from Business Location for failure to pay rent and
Subsequently was no longer able to do business. The eviction letter is attached from the
landlord. A letter was sent to the stock holders requesting additional capital to meet the request of the
Land lord with no response. The business was surrendered
to the Landlord in lew of back do rent. Effective November 12th 2011.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
former mailing address. 2606 Waldo road NE Gainesville Florida 32601
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.
Steven Perry &

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

Signature of the Person Filing

Printed Name of the Person Filing