P05000102223

(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:			
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Re	equestor's Name)	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status			
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Ac	idress)	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status		•	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Ar	ldress)	
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(, , ,	141000)	
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status			
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Ci	ty/State/Zip/Phone	e #)
(Document Number) Certified Copies Certificates of Status	PICK-UP	☐ WAIT	MAIL
(Document Number) Certified Copies Certificates of Status			
(Document Number) Certified Copies Certificates of Status	(Bi	isiness Entity Nar	ne)
Certified Copies Certificates of Status	(60	isiness Citily Nai	116)
Certified Copies Certificates of Status			
	(Do	ocument Number)	
Special Instructions to Filing Officer:	Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:			
Special Instructions to Filing Officer:			
	Special Instructions to	Filing Officer:	
	•		

Office Use Only



900141836299

01/23/09--01049--015 **43.75



09 JAN 23 AM 9: 44

T. Roberts FEB 0 3 2009

COVER LETTER

TO: Amendment Section

Division of Corporations SUBJECT: Courtney Woods Development, Inc. DOCUMENT NUMBER: P05000102223 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: John Schaffer (Name of Contact Person) ContraVest, Inc. (Firm/Company) 100 Colonial Center Parkway, Suite 470 (Address) Lake Mary, Florida 32746 (City/State and Zip Code) For further information concerning this matter, please call: John Schaffer (Area Code & Daytime Telephone Number) (Name of Contact Person) 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 Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: **Amendment Section** Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION



Pursuant to section 607.1401, 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:
	Courtney ₩₩₽S Development, Inc.
SECOND:	The document number of the corporation (if known): P05000102223
THIRD:	The file date of the articles of incorporation: 07/20/05
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Sign	ature: (By a director, president or other officer of 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.)
	John Schaffer
	(Typed or printed name of person signing)
	VP
	(Title of Person Signing)

Filing Fee: \$35