

P05000118490

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

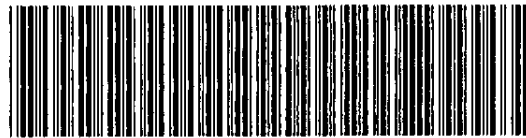
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
JAN 26 PM 2:57

Amel D. Iss
@ 1/27/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Corporation

DOCUMENT NUMBER: DD5000 118490

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kimberly Vaughn
(Name of Contact Person)

Vaughn Imagination
(Firm/Company)

2939 Royal Tuscan Ln
(Address)

Valrico, FL 33594
(City/State and Zip Code)

For further information concerning this matter, please call:

Kim Vaughn at (813) 944-8886
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

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

To whom it may concern:

Please be advised that my husband, Nathan W. Vaughn, passed away on 12/12/2009. I am filing Articles of Dissolution for the corporation and the documents will be signed by me, on his behalf.

If you have any questions or need further documentation, feel free to contact me at 813-944-8886

Thank you,

A handwritten signature in black ink, appearing to read "Kim Vaughn", followed by a long horizontal flourish.

Kim Vaughn

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:

Vaughn Imagination Inc.

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

PO 5000118490

THIRD: The file date of the articles of incorporation: _____

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.

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DIVISION OF CORPORATIONS
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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.)

Kim Vaughn / Rep. of Estate
(Typed or printed name of person signing)

(Title of Person Signing)

Filing Fee: \$35