P05000141981

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I ALBRITTON

COVER LETTER

TO: Amendment Section **Division of Corporations**

SUBJECT: SPIVEY PROPERTIES, INC DISSOL	UTION
DOCUMENT NUMBER: P05000141987	
The enclosed Articles of Dissolution and fee a	re submitted for filing.
Please return all correspondence concerning thi	s matter to the following:
DONNA SPIVEY	
(Name of Con	tact Person)
SPIVEY PROPERTIES, INC.	
(Firm/Co	ompany)
4201 RECKER HIWAY	
(Addre	ess)
WINTER HAVEN, FL 33880	
(City/State ar	nd Zip Code)
For further information concerning this matter,	please call:
DONNA SPIVEY	at (863) 287-6658
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
(A	S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy Additional copy is enclosed) S52.50 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

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 SPIVEY PROPERTIES, INC	ent of State	; :	
SECOND:	The document number of the corporation (if known):	******	_	
THIRD:	The file date of the articles of incorporation: 10/1/2005		_	
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 dito the shareholders, if shares were issued.	istributed		
SEVENTH	: Adoption of Dissolution (CHECK ONE)	, m	~-	
	A majority of the incorporators authorized the dissolution.	SECAL ALL A		-4-1
	☐ A majority of the directors authorized the dissolution.	HASSE	ૐ =>	130
Sign	nature: Donna April	OF STATE	017 APR 12 AM 9: 16	
- J.6.	(By a director, president or other officer - if directors or officers have not been selected, by in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	an incorporato	r - if	
	DONNA SPIVEY			
	(Typed or printed name of person signing)	_		
	PRES			
	(Title of Person Signing)			

Filing Fee: \$35