## P05000157682

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News
1-22-09

## **COVER LETTER**

TO: Amendment Section

Division of Corporations			
SUBJECT: Dissolution of Corporation			
DOCUMENT NUMBER: P65000157682			
The enclosed Articles of Dissolution and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Nancy Harter John Gover (Name of Contact Person)			
John's Pine Straw Services, Inc. (Firm/Company)			
87692 88669 Haven Rd. (Address)			
(Address)			
Yulee, FL 32097			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Name of Contact Person) at (904) 259- (Name of Contact Person) (Area Code & Daytin	8367 ne Telephone Number)		
Enclosed is a check for the following amount:			
(Additional copy is Cert enclosed) (Add	.50 Filing Fee, ificate of Status & ified Copy litional copy is losed)		
MAILING ADDRESS:STREET ADAmendment SectionAmendmentDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildTallahassee, FL 323142661 Execut	Section Corporations		

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
	Johns Pine Straw Services, Inc.	
SECOND:	The document number of the corporation (if known): P050601576	0890 3
THIRD:	The date dissolution was authorized: 12 31 68	- CONT.
	Effective date of dissolution if applicable: 12 31 58 (no more than 90 days after dissolution)	n file date)
FOURTH:	Adoption of Dissolution (CHECK ONE)	
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for dissolution
	Dissolution was approved by the shareholders through voting groups.	
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled
	The number of votes cast for dissolution was sufficient for approval by	
	X John C. Gover (voting group)	
	4	
	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)	
	John C. Cover (Typed or printed name of person signing)	,
	The state of printed manner of person alguming)	
	(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: John's Pine Straw, Services, Inc.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
Date of debt/claim, Proof of services/items delivered
· · · · · · · · · · · · · · · · · · ·
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Yulee, FL 32097
MATLING Address - POBX 601, FERWAUdium Bch FL 32035
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.
Tohn C. Cover  Printed Name of the Person Filing  Y Jahr C Cover  Mignature of the Person Filing