

P06000008369

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

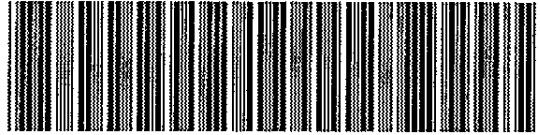
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

December 12, 2006

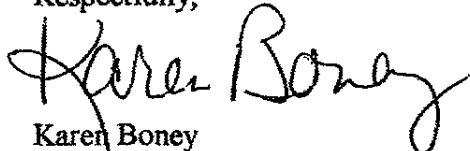
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

RE: Patrick's Place Inc. – Document # P06000008269

Dear Sirs:

Per my conversation this morning with your department, I am submitting the required documents for voluntary dissolution of this corporation. Patrick's Place Inc. was established in January 2006 prematurely as a For Profit Corporation. We have since confirmed our qualification as a 501C corporation Not For Profit and have also attached the correct documents. It is my understanding after our conversation this morning that I should mail both sets of documents to your department so you could dissolve the For Profit and set up the 501C so we can use the same corporate name. I have also attached 2 different checks for the amount indicated on the applications. Please feel free to call me if you have any questions or concerns, 904-261-5344. I look forward to your reply. Thank you.

Respectfully,



Karen Boney  
VP/Owner

Enclosures: Voluntary Dissolution of Corporation  
Check # 7614 in the amount of \$35.00  
Original and 1 copy of Articles of Corporation – 501C Corp.  
Check # 7615 in the amount of \$70.00

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Voluntary Dissolution of Corporation

**DOCUMENT NUMBER:** P06000008269

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

Please return all correspondence concerning this matter to the following:

Karen Boney

(Name of Contact Person)

(Firm/Company)

1890 S. 14th St. Suite 120

(Address)

Fernandina Beach, FL. 32034

(City/State and Zip Code)

For further information concerning this matter, please call:

Karen Boney

(Name of Contact Person)

at ( 904 ) 261-5344

(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

## 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:

Patrick's Place, Inc.

SECOND: The document number of the corporation (if known): P060000008269

THIRD: The date dissolution was authorized: December 12, 2006

Effective date of dissolution if applicable: December 12, 2006  
(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.

☐ 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

Board of Directors  
(voting group)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Signature: Karen Boney - VP

(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)

Karen Boney

(Typed or printed name of person signing)

VP

(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: Patrick's Place, Inc.

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:

N/A  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

N/A  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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.

Karen Boney  
Printed Name of the Person Filing

Karen Boney  
Signature of the Person Filing

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