PO4000038518

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	<u> </u>
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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SECRETARY OF STATE
AND ANASSFE. FLORIDA

COVER LETTER

FO: Amendment Section Division of Corporations

SUBJECT: The Lawson Brothers Transportation, Inc.
DOCUMENT NUMBER: P06000038518
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
David Lawson
(Name of Contact Person)
The Lawson Brothers Transportation, Inc.
(Firm/Company)
6982 S. County Road 125
(Address)
Macclenny, Florida 32063 (City/State and Zip Code)
For further information concerning this matter, please call:
David Lawson at (904) 859-9002
(Name of Contact Person) (Area Code & Daytime Telephone Number)
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 (Additional copy is enclosed) Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:
	The Lawson Brothers Transportatation, Inc.
SECOND:	The document number of the corporation (if known): P06000038518
THIRD:	The date dissolution was authorized: December 15, 2006
	Effective date of dissolution <u>if applicable</u> : December 15, 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 entitles to vote separately on the plan to dissolve:
	The number of votes cast for dissolution was sufficient for approval by
	(voting group) PATE 32
\$	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)
	David Lawson
	(Typed or printed name of person signing)
	President
	(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: The Lawson Brothers Transportation, 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:
Itemized statement with amounts due and dates performed, along
with any required documentation.
72006 TALL.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporation)
David Lawson
6982 S. County Road 125
Macclenny, Florida 32063
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.
David Lawson Printed Name of the Person Filing Signature of the Person Filing
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Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00