Po6000040291

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
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SEURETARY OF STATE
TATE AHASSEEL FLORIOA

C. LEWIS MAR - 7 2014 EXAMINER

COVER LETTER

Division of Corporations				
SUBJECT: MARY LYNN BEAUMONT, INC				
DOCUMENT NUMBER: P06000040291				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
MARY LYNN BEAUMONT				
(Name of Contact Person)				
(Firm/Company)				
PO BOX 783				
(Address)				
SAN ANTONIO, FL 33576				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
MARY LYNN BEAUMONT _{at (} 813) 713-1353				
(Name of Contact Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
□ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed) 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 MARY LYNN BEAUMONT, INC	f State:			
SECOND:	The document number of the corporation (if known): P06000040291				
THIRD:	The date dissolution was authorized: DECEMBER 31, 2013				
	Effective date of dissolution if applicable: DECEMBER 31, 2013 (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 was sufficient for approval.	for disso	lution		
	☐ 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		NAM 71		
	100%	1881 1881	-6		
	(voting group)	OF STATE S. FLORIDA	PH 12: 53		
	Signature: Beauty (By a director, president or 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)				
	MARY LYNN BEAUMONT, INC.				
	(Typed or printed name of person signing)				
	PRESIDENT				
	(Title of person signing)				

Filing Fee: \$35