## P0600004773S

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

• TO: Amendment Section Division of Corporations

SUBJECT: Business Went Broke wish to Dissolve			
DOCUMENT NUMBER: P06000047935			
DOCUMENT NUMBER:			
The enclosed Articles of Dissolution and fee are s	submitted for filing.		
Please return all correspondence concerning this n	natter to the following:		
BLANCA PAZOS			
(Name of Contac	et Person)		
LUCKY TAILS DOGGY DAY CARE, INC.			
(Firm/Company)			
1540 SE 42ND TERRACE			
(Address)	)		
CAPE CORAL FL 33904			
(City/State and Zip Code)			
For further information concerning this matter, pla	ease call:		
	t (_239) 541-8913		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:			
(Add	3.75 Filing Fee & \$\sum \\$52.50 Filing Fee, tified Copy		
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 o	f State:
SECOND:	The document number of the corporation (if known): P06000047935	- <b>T</b> . 9
THIRD:	The file date of the articles of incorporation: APRIL 04 2006	OG OCT
FOURTH:	(CHECK AT LEAST ONE BOX)	ASSE
	None of the corporation's shares have been issued.	AM 9: U3
	The corporation has not commenced business.	TATE ORIDA
FIFTH:	No debt of the corporation remains unpaid.	
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	uted
SEVENTH:	Adoption of Dissolution (CHECK ONE)	
	A majority of the incorporators authorized the dissolution.	
	A majority of the directors authorized the dissolution.	
Sign	nature:  (By a director, president or other officer - if directors or officers have not been selected, by an inc in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	orporator - if
	BLANCA PAZOS  (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: LUCKY TAILS DOGGY DAY CARE, 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: CITY OF CAPE CORAL DID NOT LET COMPANY START Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 1540 SE 42ND TERRACE CAPE CORAL FL 33904 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.

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

**BLANCA PAZOS** 

Printed Name of the Person Filing