P06000069363

(Reque	estor's Name)	
(Addres	ss)	
(Addres	ss)	
(City/St	ate/Zip/Phon	e #)
PICK-UP [WAIT	MAIL
(Busine	ess Entity Na	me)
(Docum	nent Number)	
Certified Copies	Certificate	s of Status
Special Instructions to Filin	g Officer:	

Office Use Only

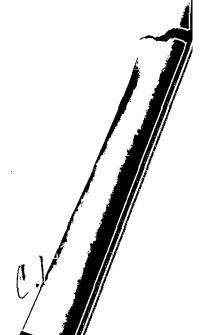


100255296281

01/10/14--01011--001 **35.00

ALLAHASSEE TO GRODA
ALLAHASSEE TO GRODA
ALLAHASSEE TO GRODA
ALLAHASSEE TO GRODA

APPROVED AND FILED



COVER LETTER

TO: Amendment Section **Division of Corporations SUBJECT:** Corporate Dissolution P06000069363 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ward L. Schwabland (Name of Contact Person) (Firm/Company) 913 Lake Hollingsworth Drive (Address) Lakeland, Florida 33803 (City/State and Zip Code) For further information concerning this matter, please call: Ward L. Schwabland (Area Code & Daytime Telephone Number) (Name of Contact Person) 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 & Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional copy is enclosed) enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

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: SCHWABLAND ENTERPRISES, INC. The document number of the corporation (if known): P06000069363		
SECOND:			
ΓHIRD:	The date dissolution was authorized: 1/11/2012		
	Effective date of dissolution <u>if applicable</u> : 1/11/2012 (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		
	(voting group)		
;	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)		
•	Ward L. Schwabland		
	(Typed or printed name of person signing)		
	DVT		
	(Title of person signing)		

Filing Fee: \$35

APPROVEI

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 SCHWABLAND ENTERPRISES, 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: The corporation was been dissolved 1/11/2012. The company went out of business. Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 913 Lake Hollingsworth Drive Lakeland, Florida 33803 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. Ward L. Schwabland Signature of the Person Filing Printed Name of the Person Filing

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