## P06000071673

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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EXAMINER'S INITIALS:

## 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:
JIKOI.	
	CA Coral Strings, Inc.
SECOND	: The document number of the corporation (if known): PO60000 7167 35
THIRD:	The date dissolution was authorized: September 3, 2013
	Effective date of dissolution if applicable: September 3, 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 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: Kod Jasse
	(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)
	Rod Sasse
	(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: CA Coral Springs, 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:
Claimant's name and address; nature of claim, amount, and date incurred.
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Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
1005 N. Glebe Road, Svite 610
Arlington, VA 22201
clo Imagine Schools
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.
Rod Sasse, President  Printed Name of the Person Filing  Signature of the Person Filing

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