

PO6000115664

Sender's
Name

Phone

Company

Address

City

State

ZIP

Dept./Floor/Suite/Room



900138498999

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies

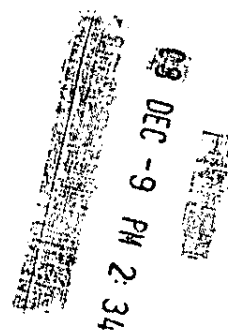
Certificates of Status

Special Instructions to Filing Officer:

Office Use Only

12/09/08--01027--012 **35.00

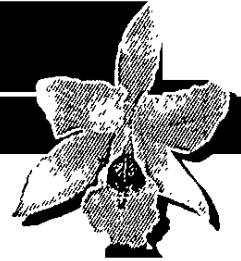
Effective Date
12/31/08



Disseminated
12/11/08
TS



Licensed Real Estate Broker ◦ 1 352 347 7222



December 3, 2008

FEDERAL EXPRESS
8675 2260 6829

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

To Whom It May Concern:

Enclosed are Articles of Dissolution and a check in the amount of \$35 which is payment in full for the filing fee.

Please contact the undersigned at 305-372-9200 if there are any questions. Thank you in advance for your attention to this filing.

Sincerely yours,

A handwritten signature in black ink, appearing to be "SMA", written over a horizontal line.

SHEILA M. ANDERSON

SMA/d
Enclosures: As Noted.

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:

OcalaResidential.com, Inc.

SECOND: The document number of the corporation (if known): P06000115664

THIRD: The date dissolution was authorized: December 3, 2008

Effective date of dissolution if applicable: December 31, 2008

(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)

Sheila M. Anderson

(Typed or printed name of person signing)

President, Secretary, Treasurer

(Title of person signing)

Filing Fee: \$35

