POW0/34682

(Requesto	r's Name)
(Address)	
(Address)	
(City/State	s/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Document Number)	
Certified Copies	Certificates of Status
Special Instructions to Filing (Officer:
•	
	: .

Office Use Only

5-1309



900155517339

05/07/09--01020--021 **35.00

TAHASSEE. FLORIDA

SECRETARY OF STATE OF ALLAHASSEE, FI OBIO

009 MAY -7 PM 12: 3

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Dissolution of CLong Auto's IV
DOCUMENT NUMBER: <u>PO 600013468</u> 2
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Calvin Long (Name of Contact Person)
4
C. Long Auto's Inc. (Firm/Company)
(Firm/Company)
410 Jax Estates Dr N. (Address)
Jax, Fla 32218
(City/State and Zip Code)
For further information concerning this matter, please call: 509
Calvin Long at 904, 309-4296
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigcup \$43.75 Filing Fee & \$\bigcup \$43.75 Filing Fee & \$\bigcup \$52.50 Filing Fee, \$\text{Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed)} Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: STREET ADDRESS:
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 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 State:
SECOND:	The document number of the corporation (if known): P0600134682
THIRD:	The date dissolution was authorized: 5/1/09
	Effective date of dissolution <u>if applicable</u> : 5/1/09 (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
Incol	The number of votes cast for dissolution was sufficient for approval by ALLAHASSEE TARY OF STATE (voting group) The number of votes cast for dissolution was sufficient for approval by ALLAHASSEE TORNE OF STATE (voting group)
s	Gignature: (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)
-	Pamela Long (Typed or printed name of person signing)
-	Vice president
	(Title of person signing)

Filing Fee: \$35