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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: Family	Lending Group
DOCUMENT NUMBER: PO6000 14	2066
The enclosed Articles of Revocation of Dissolution	and fee are submitted for filing.
Please return all correspondence concerning this m	atter to the following:
Rene Rodeique	1
Name of Co	ntact Person
Family Lending GR	oup
Firm/Co	ompany
807 Coeal Ridge De	Caral Speings FL 3307/
<b>y</b> Add	
City/State at Rene a family lending group E-mail address: (1) be used for	Comunitation)
For further information concerning this matter, plea	ase call:
Rene	at (-954 ) 914 - 5300
Name of Contact Person	- Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  \$\$\$ Certified Copy (Additional copy is enclosed)
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 of State:	
* * .	Family Lending George, Inc.	
SECOND:	The document number of the corporation (if known): POG 000 142066	
THIRD:	The file date of the articles of incorporation: 1113 2006	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	None of the corporation's shares have been issued.	
	The corporation has not commenced business.	
FIFTH:	No debt of the corporation remains unpaid.	
	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	
SEVENTH:	Adoption of Dissolution (CHECK ONE)	
	A majority of the incorporators authorized the dissolution.	Į.
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Sign	ature:	
Jigii	(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.)	

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: Formy Lencing Croy, 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:

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

8712 Mahagany Are Plantation PL 33324

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.

Printed Name of the Person Filing

Signature of the Person Filing