## 10000/1/38/

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ry/State/Zip/Phone	÷#)
PICK-UP	WAIT	MAIL
<b>(</b> Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE
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## **COVER LETTER**

•	TO: Amendment Section  Division of Corporations	
	Division of Corporations	
	SUBJECT: Lake Tahoe Management, Inc.	
	DOCUMENT NUMBER: <u>P06000147381</u>	
	The enclosed Articles of Dissolution and fee are submitted for filing.	
	Please return all correspondence concerning this matter to the following:	
	Bricklemyer, Smolker & Bolves (Firm/Company)	
	500 E. Kennedy Blud, & Suite 700	
	()	
Tample, FL 33602 (City/State and Zip Code)		
	For further information concerning this matter, please call:	
	Steven Mederstory at (813) 223-3888  (Name of Contact Person) (Area Code & Daytime Telephone Number)	
	Enclosed is a check for the following amount:	
	\$35 Filing Fee \$\bigs\ \text{\$43.75 Filing Fee & \$\bigs\ \text{\$43.75 Filing Fee & \$\bigs\ \text{\$52.50 Filing Fee, } \text{\$Certificate of Status & \$\text{\$Certified Copy & \$\text{\$Additional copy is & \$\text{\$enclosed}\$}\$	
	MAILING 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 607.1401, 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:	
	Lake Tahoe Management	
SECOND:	The document number of the corporation (if known): PO6000/4738/	
THIRD:	The file date of the articles of incorporation: 11/27/06	
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.	
SIXTH:	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.	
	A majority of the directors authorized the dissolution.	
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.)	
	Steven R. Meden Jor P (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. 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) 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.

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