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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
, (Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies		s of Status
Special Instructions to		
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Dissolution of Corporation
DOCUMENT NUMBER: POLOOO 1471019
The enclosed Articles of Dissolution and fee are submitted for Ming.
Please return all correspondence concerning this matter to the first ewing:
Jennifer Coshman (Name of Contact Person)
(Name of Contact Ferson)
(Firm/Company)
2465 Andros Ln 1861
(Address)
FA. Lauderdale Fl 33312
(City/State and Zip Code)
For further information concerning this matter, please call:
Jennier Ochman at (353) (15-517) (Name of Contact Person) (Area Collect Daytime Telephone Number)
Enclosed is a check for the following amount:
**S35 Filing Fee ** \$\begin{array}{ c c c c c c c c c c c c c c c c c c c
MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Clifton Building
2361 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:
	Serenity Stables of Ocala, Inc.
SECOND:	The document number of the corporation (if known): POLODO 147619
THIRD:	The date dissolution was authorized: 12 15 07
	Effective date of dissolution if applicable: 12 31 07 (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)
	TILE TO THE TOTAL TO THE TOTAL
S	(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)
	(Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35