

PD70000006469

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

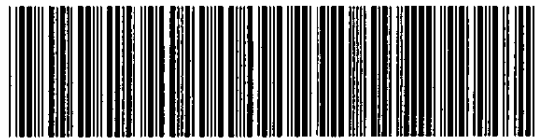
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/15/10--01014--011 **35.00

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FILED
10 JAN 15 PM 4:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Roberts JAN 19 2010

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:

Likeatures, inc

SECOND: The document number of the corporation (if known): 707000006469

THIRD: The date dissolution was authorized: 1/5/10

Effective date of dissolution if applicable: _____
(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

Thomas J. Stracke
(voting group)

Signature:

Thomas J. Stracke
(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)

Thomas L. Stracke
(Typed or printed name of person signing)

president
(Title of person signing)

Filing Fee: \$35

FILED
JAN 15 PM 4:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: LIKEATURES . 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:

THIS corporation was started as a
custom artistic creation company. I have since
gone back to school in the last year and a
half so no business in the corporation has

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

3410 Reynoldswood Dr
Tampa, FL 33618

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.

Thomas Stracke
Printed Name of the Person Filing

Thomas Stracke
Signature of the Person Filing

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