P07000148742

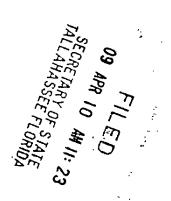
(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(8	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
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211/2

COVER LETTER

TO: Amendment Section		
Division of Corporations		
SUBJECT: NECEE'S CAFE, INC.		
DOCUMENT NUMBER: P07000048742		
The enclosed Articles of Dissolution and fee are submitted f	or filing.	
Please return all correspondence concerning this matter to the	e following:	
DENISE J. HAAS		
(Name of Contact Person)		
NECEE'S CAFE, INC.		
(Firm/Company)		
1788 FAULDS ROAD NO	RTH	
(Address)		
-CLEARWATER, FL 337	56	
(City/State and Zip Code)	V1 75 E-179	
For further information concerning this matter, please call:		
DENISE J. HAAS at (727	524-9502	
(Name of Contact Person) (Area C	Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
✓\$35 Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filing I Certified Copy (Additional copenclosed)		
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 607.1403, 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:		
	NECEE'S CAFE, INC.		
SECOND:	The document number of the corporation (if known): P07000048742		
THIRD:	The date dissolution was authorized: 04/01/2009		
	Effective date of dissolution <u>if applicable</u> : 04/01/2009 (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)		
	ED STATE LORIDA		
	Signature: X Consider Specification of the fide of the selected of the selecte		
	DENISE J. HAAS		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)		

Filing Fee: \$35