P07000130737

(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:

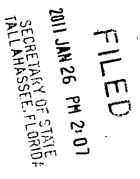
Office Use Only



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1/27/11

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION:	LOST RIVER F	FARMS INC.		
DOCUMENT NUM	MBER:	P07000	P07000130837		
The enclosed Article	es of Amendment and fee a	re submitted for filing.			
Please return all cor	respondence concerning th	s matter to the followi	ing:		
	RI	CHARD F. OLSON			
	was a second	ame of Contact Person	• • •		
	LOS	RIVER FARMS INC	C.		
_		Firm/ Company			
	3407 5\/	BESSEY CREEK T	'RAII		
_	0407 040	Address	TIME		
_		CITY, FL 34990-18	05		
	C	ity/ State and Zip Code			
		TTA@ME.COM			
	E-mail address: (to be use	d for future annual report n	notification)		
For further informat	ion concerning this matter,	please call:			
RICH	IARD F. OLSON	at (772)	485-1332		
Name o	ARD F. OLSON f Contact Person	Area Code &	Daytime Telephone Number		
Enclosed is a check	for the following amount r	nade payable to the Flo	orida Department of State:		
☑ \$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee Certified Copy (Additional copy i	Certificate of Status		
Mailing Add		Street Address			
Amendment Section			Amendment Section		
Division of Corporations P.O. Box 6327		•	Division of Corporations Clifton Building		
Tallahassee, FL 32314			2661 Executive Center Circle		

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION



Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following are of dissolution:				
of dissolution	SECRETARY OF STATE TALLAHASSEE FLORIDA			
FIRST:	The name of the corporation as currently filed with the Florida Department of State:			
	LOST RIVER FARMS INC.			
SECOND:	The document number of the corporation (if known): P07000130837			
THIRD:	The date dissolution was authorized: 12/31/2010			
	Effective date of dissolution if applicable: 12/31/2010 (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			
RICHARD F OLSON				
(voting group)				
	Signature: (By a director, president or other officel 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)			
	RICHARD F OLSON			
	(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.

Name of Corp	oration: LOST RIVER FARMS INC.
	ution will be the date the dissolution is filed with the Department of State or as e Articles of Dissolution.
Description of	information that must be included in a claim:
NAME	
ADDRESS	3
PHONE N	UMBERS
CLAIM	
PROOF C	OF CLAIM
Mailing addre	ss where claims can be sent: (Claims cannot be sent to the Division of Corporations) RICHARD F. OLSON
	3407 SW BESSEY CREEK TRAIL
	PALM CITY, FLORIDA
	34990-1805
within 4 years	st the above named corporation will be barred unless a proceeding to enforce the claim is commenced after the filing of this notice. F. OLSON

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

Printed Name of the Person Filing