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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APRIOVED AND FILED



COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Dissolution of Ginnane	Family Management Company, Inc.
DOCUMENT NUMBER: P08000	008366
The enclosed Articles of Dissolution and for	ee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Dawn Ginnane	
(Name of O	Contact Person)
(Firm	n/Company)
53 Island Estates Parkv	vay
Palm Coast, FL 32137	ddress)
(City/Star	te and Zip Code)
For further information concerning this mat	ter, please call:
Shanyn Smith	at (386_) 864-5310
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amou	nt:
■ \$35 Filing Fee ■ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
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: Ginnane Family Management Company, Inc.					
SECOND:	6/05/2014					
THIRD:	The date dissolution was authorized: 6/25/2014 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					
	(voting group)					
	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)	SECRETARY OF STATE TALLAHASSEE, FLORIDA	14 JUN 30 PM 1: 00	FILED		
	Dawn Ginnane	>				
	(Typed or printed name of person signing) VPS (Title of person signing)					

Filing Fee: \$35