P0800011145

it. ji

(Re	equestor's Name)	<u>. </u>	
(Ac	ddress)		
(Ad	ddress)		
(Ci	ty/State/Zip/Phone	· #)	
PICK-UP	☐ WAIT	MAIL	
(Bo	usiness Entity Nam	ne)	
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to Filing Officer:			
		·	

Office Use Only



400147880594

04/07/09--01033--011 **35.00

09 APR -7 PM12: 27

SECRETARY OF STATE DIVISION OF CORPORATIONS

AND 135 May 10.09

· COVER LETTER

TO: Amendment Section

Division of Corporations				
SUBJECT: Dissolution of (orporation_			
DOCUMENT NUMBER: POSCOCOTI 45				
The enclosed Articles of Dissolution and fee are submitted for	r filing.			
Please return all correspondence concerning this matter to the	following:			
Lara McNe() (Name of Contact Person)				
LJ. Mcneil Inc. (Firm/Company)				
5031. 4921 SW 11 Circ (Address)				
Margate FL 33068 (City/State and Zip Code)				
For further information concerning this matter, please call:				
$\frac{1 \text{ at } (954)}{\text{(Name of Contact Person)}} \text{ at } (954)$) 740-0994 ode & Daytime Telephone Number)			
Enclosed is a check for the following amount:				
\$\sqrt{\$35}\$ Filing Fec \$\sqrt{\$43.75}\$ Filing Fee & Certificate of Status \$\sqrt{\$Additional copy cnclosed}\$	Certificate of Status &			
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:				
	L.J. Mcneil, Inc.				
SECOND:	The document number of the corporation (if known): POSOCO 11145	<u> </u>	_		
THIRD:	The date dissolution was authorized:				
	Effective date of dissolution if applicable: (no more than 90 days after dissolution fi	le date)	_		
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes cast for was sufficient for approval.	or dissolu	tion		
	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) (Typed or printed name of person signing)	09 APR -7 PM 12: 27	FILED SECRETARY OF STATE DIVISION OF CORPORATIONS		
	Dresident (Title of person signing)				

Filing Fee: \$35