

PO 8000014987

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

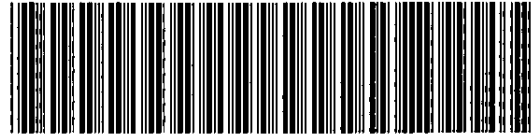
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400211280004

08/26/11--01025--009 **35.00

EFFECTIVE DATE

8-31-11

2011 AUG 26 PM 3:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

8-30-11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NATE'S GRAB & GO FLORIDA, INC.

DOCUMENT NUMBER: P08000014987

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

GARY DAVID BRADY, CPA

(Name of Contact Person)

GARY DAVID BRADY, PA

(Firm/Company)

1040 BAYVIEW DRIVE #414

(Address)

FORT LAUDERDALE, FL 33304

(City/State and Zip Code)

For further information concerning this matter, please call:

GARY DAVID BRADY, CPA

(Name of Contact Person)

at (954) 563-7456

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 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

EFFECTIVE DATE
8/31/11

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:

NATE'S GRAB & GO FLORIDA, INC.

SECOND: The document number of the corporation (if known): P08000014987

THIRD: The date dissolution was authorized: 08/17/11

Effective date of dissolution if applicable: 08/31/11

(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)

NATHAN MILLER

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

FILED
AUG 26 PM 3:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA