## **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000114227 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: CORPORATION SERVICE COMPANY

Account Number : I2000000195

Phone

: (850)521-1000

Fax Number

: (850)558-1575

## DISSOLUTION OR WITHDRAWAL

## SPLIT OAK ENTERPRISES CORPORATION

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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	nt of State:		
	SPLIT OAK ENTERPRISES CORPORATION	<del></del>		
SECOND:	The document number of the corporation (if known): P08000029622			
THIRD:	The file date the articles of incorporation: 3-20-08			
FOURTH:	(CHECK AT LEAST ONE BOX)			
1	None of the corporation's shares have been issued.			
	The corporation has not commenced business.			
FIFTH:	No debt of the corporation remains unpaid.			
SIXTH:	The net assets of the corporation remaining after winding up have been disto the shareholders, if shares were issued.	tributed		
SEVENTH:	Adoption of Dissolution (CHECK ONE)	- may		
	☐ A majority of the incorporators authorized the dissolution.	ALLA SECR	08 A	
	A majority of the directors authorized the dissolution.	RETARY OF S MASSEE, FL	APR 29 PM 4:	
Sien	ature: /s/Charlene D. Gornto	ORII	<del></del>	<b>*196</b>
	(By a director, president or other officer - if directors or officers have not been selected, by an in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	і іпсогропалот - іf		
	CHARLENE D. GORNTO			
	(Typed or printed name of person signing)			
	DIRECTOR			
	(Title of Person Signing)			

Filing Fee: \$35