Po8000035343

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Dissolution of	PO8000035343
DOCUMENT NUMBER: <u> </u>	30000 35343
The enclosed Articles of Dissolution and fee	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
(Name of C	ontact Person)
Law of (Firm)	Kice of Tammy Laques
138 W New	York Aue, Suite I
De la (City/State	and Zip Code)
For further information concerning this matte	er, please call:
Tammy Lagues (Name of Contact Person)	at (<u>386</u>) <u>228 - 2231</u> (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount	t:
S35 Filing Fee \$43.75 Filing Fee & C 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:	
	Law Office of Tommy Liques P.A.		
SECOND:	The document number of the corporation (if known): PO8 0000 35	343	
THIRD:	The date dissolution was authorized: March 9, 2015	·	
	Effective date of dissolution if applicable: March 11, 2015 (no more than 90 days after dissolution to) ile date)	
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cast f was sufficient for approval.	or dissol	ution
	☐ Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting group ento vote separately on the plan to dissolve:	ititled	
	The number of votes cast for dissolution was sufficient for approval by	15	SIAIG
	Tammy Jagues (2)	MAR 13	CORETARY
		PR -	2000 N
		1:26	A108
	Signature: (By a director, president of 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)		
	President (Title of person signing)		

Filing Fee: \$35

Notice of Corporate Dissolution

Law office of Tommy liques

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 Corporation:

within 4 years after the filing of this notice.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .		
Description of information that must be included in a claim:		
Name, Case or Account number, Date of Service: Purported Amount Due and owing	S,	
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)	15 MAR 13	DIVISION OF
PO Box 332 Cassadaga, Fr 32706	3 PM 1:26	DORTORATIONS

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

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced