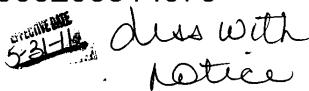
P08000536H

(Requ	uestor's Name)	
(Addi	ess)	
(Addi	ess)	
(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nan	ne)
(Docu	ıment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fil	ling Officer:	

Office Use Only



500200814075



04/08/11--01046--001 **105.00



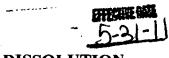
1000 HUIL

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Articles of Dissolution	
DOCUMENT NUMBER: P08000053664	
The enclosed Articles of Dissolution and fee are submit	ted for filing.
Please return all correspondence concerning this matter t	to the following:
Michele A. Kincaid	
(Name of Contact Person	on)
ABC Montessori Inc	
(Firm/Company)	
920 Town Hall Ave	
(Address)	
Jupiter, Florida 33458	
(City/State and Zip Co	ode)
For further information concerning this matter, please ca	ıll:
Michele A. Kincaid at (56 (Name of Contact Person)	719-4338 Trea Code & Daytime Telephone Number)
	neu code a baytime relephone rumosty
Enclosed is a check for the following amount:	
\$35 Filing Fee \$43.75 Filing Fee \$\$43.75 Fil Certificate of Status Certified C (Additional enclosed)	I copy is Certified Copy
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

FILED

Pursuant to of dissolution	section 607.1403, Florida Statutes, this Florida profit corporation submits the fighpwing attidies 6		
or dissolution	SECRETARY OF STATE TALLAHASSEE, FLORID!		
FIRST:	The name of the corporation as currently filed with the Florida Department of State: ABC Montessori, Inc.		
SECOND:	The document number of the corporation (if known): P08000053664		
THIRD:	The date dissolution was authorized: 03/31/2011		
	Effective date of dissolution <u>if applicable</u> : 5/31/2011 (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)		
	(and Start)		
\$	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)		
	Michele A. Kincaid		
	(Typed or printed name of person signing)		
	President		

Filing Fee: \$35

(Title of person signing)

Notice of Corporate Dissolution

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: ABC Montessori Inc. Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 920 Town Hall Ave Jupiter, Florida 33458 A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice. Michele A. Kincaid Printed Name of the Person Filing

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