

PD8000090287

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

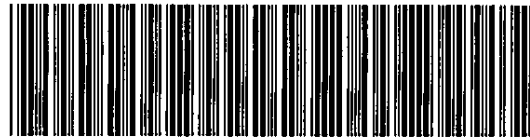
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/13/15--01034--013 **43.75

EFFECTIVE DATE

April 15, 2015

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2015 APR 13 AM 11:08

And Dis. ^{all}
@ 4.15.15

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Allen Elder and Family Law, P.A.

DOCUMENT NUMBER: P080000090287

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

Please return all correspondence concerning this matter to the following:

Karla Carnes Allen

(Name of Contact Person)

Allen Elder and Family Law, P.A.

(Firm/Company)

10019 Park Place Avenue

(Address)

Riverview, FL 33578

(City/State and Zip Code)

For further information concerning this matter, please call:

Karla Carnes Allen

(Name of Contact Person)

at (**813**)

215-0600

(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

EFFECTIVE DATE
April 15, 15

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:

Allen Elder and Family Law, P.A.

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

PD8000092587

THIRD: The date dissolution was authorized: March 17, 2015

Effective date of dissolution if applicable: April 15, 2015

(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: Karla Carnes Allen

(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)

Karla Carnes Allen

(Typed or printed name of person signing)

President

(Title of person signing)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
2015 APR 13 AM 11:08

Filing Fee: \$35