(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			
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Office Use Only



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## COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: CORPORATION DISSOC	ution
DOCUMENT NUMBER: P090004000	2
The enclosed Articles of Dissolution and fee are submitted for	filing.
Please return all correspondence concerning this matter to the f	following:
NED LEVITAS	
(Name of Contact Person)	
BEST. TAX + ACCOUNTING	SERVICES INC
BEST. TAX + ACCOUNTING  (Firm/Company)  (Address) LAKE  MAMMARANECK NY 10543  PRIOR TO 10/31 (City/State and Zip Code)	6508 TOGNI ST.
1324 BINCHHILL IN	THE THE TENE
(Address) LAKE	WORTH, FL 33467
MAMARONECK NY 10543/	4 ( )
PRIOR TO 10/31 (City/State and Zip Code)	AFTER 11/01
For further information concerning this matter, please call:	
NEALEVITAS at (914	393-0655
(Name of Contact Person) (Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy (Additional copy enclosed)	cee & \$\int_\$\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Amendment Section Division of Corporations	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:						
	DAN'S SOUTHEASTERN SALES INC.						
SECOND:	The document number of the corporation (if known): PO9000 04000	<u>2</u>					
THIRD:	The date dissolution was authorized: DEC. 31, 2011	_					
	Effective date of dissolution if applicable: DEC . 3 ( 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 dissolut was sufficient for approval.	ion					
	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:	SEURE					
	The number of votes cast for dissolution was sufficient for approval by $\frac{\triangleright}{}$	ARY					
		OF S					
	(voting group)	AIE					
	Signature: (By a director, president or other officer - if directors oxofficers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)						
	DANIEL BROWNYARD (Typed or printed name of person signing)						
	PRESIDENT						
	(Title of person signing)						

Filing Fee: \$35

## **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 Corporat	tion: DAN'S	SOUTHEASTE	ERN	SALES 1	NC.
	n will be the date the rticles of Dissolution	dissolution is filed with the Depa	artment of	State or as	
Description of inf	formation that must be	e included in a claim:			
· · · · · · · · · · · · · · · · · · ·			<del></del> .		
Mailing address w	vhere claims can be s	ent: (Claims cannot be sent to the	Division	of Corporations)	1
	1827 57	4 STREET SOUTHER	195T		
	WINTER	HAUSN, FL.	338	80	
_					
	he above named corporter the filing of this no	oration will be barred unless a protice.	oceeding t	o enforce the cla	im is commenced
DANI	EL BROWN Printed Name of the Per	YARD X	Sign	ature of the Person F	

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