

PD9000048208

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

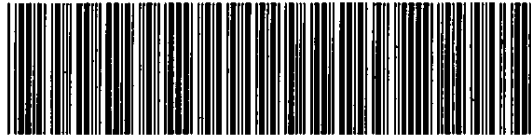
(Document Number)

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10 MAR 25 AM 10:10  
SECOND FLOOR OF STATE  
TALLAHASSEE, FLORIDA

Voldiss  
3/26/10

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dan's Catering Inc

**DOCUMENT NUMBER:** PO 9 0000 48 208

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

Please return all correspondence concerning this matter to the following:

Daniel Dos Santos  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

2031 Island Circle  
(Address)

Winston FL 33326  
(City/State/and Zip Code)

For further information concerning this matter, please call:

Daniel Dos Santos at ( 954 ) 839-4054  
(Name of Person) (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, Florida 32314

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

## 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:

DANI'S CATERING, INC

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

PO 90000 48208

THIRD: The date dissolution was authorized:

10/1/2009

Effective date of dissolution if applicable:

(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

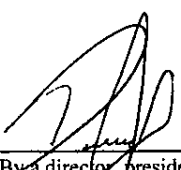
☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ 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: 

(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)

DANIEL DOS SANTOS

(Typed or printed name of person signing)

President

(Title of person signing)

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10 MAR 25 AM 10:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Filing Fee: \$35