## P04000054253

| (Re                     | questor's Name)   |             |
|-------------------------|-------------------|-------------|
|                         |                   |             |
| (Ad                     | dress)            |             |
|                         |                   |             |
| (Ad                     | dress)            | ·           |
|                         |                   |             |
| (Cit                    | y/State/Zip/Phone | e #)        |
|                         |                   |             |
| PICK-UP                 | WAIT              | MAIL        |
|                         |                   |             |
| (Bu                     | siness Entity Nar | ne)         |
|                         |                   |             |
| (Do                     | cument Number)    |             |
| ·                       | ·                 |             |
| Certified Copies        | Certificates      | s of Status |
|                         | _                 |             |
|                         |                   |             |
| Special Instructions to | Filing Officer:   |             |
|                         |                   |             |
|                         |                   |             |
|                         |                   | :           |
|                         |                   |             |
|                         |                   |             |
|                         |                   |             |
|                         |                   |             |

Office Use Only



800293483828

01/19/17--01014--006 \*\*35.00

A DR. TARY of STATE A

JAN 23 2017 CLEWIS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

| SUBJECT:   | Woods Investments, Inc.           | <del></del>  |
|--|-----------------------------------|--|
| DOCUMENT NUMBER:   | 000054253                         |  |
| The enclosed Articles of Dissolution and                   | fee are submitted for filin       | g.   |
| Please return all correspondence concerni                  | ng this matter to the follow      | ving:  |
| Nicho  | olas T. Simonic                   |  |
| (Name o  | f Contact Person)                 |  |
| Simonic, Simonic   | c, Ratnecht & Associates ,Inc.    |  |
| (Fi  | rm/Company)                       |  |
| 8750 Pe  | erimeter Park Blvd                |  |
| (  | Address)                          |  |
| Jackson  | nville, FL 32216                  |  |
| (City/S  | tate and Zip Code)                |  |
| For further information concerning this m                  | natter, please call:              |  |
| Nicholas T. Simonic  | at (                              | 904-928-1040   |
| (Name of Contact Person)                                   |                                   | (Daytime Telephone Number)   |
| Enclosed is a check for the following amo                  | ount:                             |  |
| \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status |                                   | □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) |
| MAILING ADDRESS: Amendment Section                         | STREET ADDRESS: Amendment Section |  |

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

## 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:  S & A Woods Investments Inc.  |  |  |  |
|---------|---|--|--|--|
| SECOND: | The document number of the corporation (if known):  P09000054253  |  |  |  |
| THIRD:  | The date dissolution was authorized:  |  |  |  |
|         | Effective date of dissolution if applicable:    January 1, 2017   (no more than 90 days after dissolution file date)  |  |  |  |
|         | Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wil not be listed as the document's effective date on the Department of State's records. |  |  |  |
| 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)  |  |  |  |
|         | Annette Woods   |  |  |  |
|         | (Typed or printed name of person signing)   |  |  |  |
|         | Vice President  |  |  |  |
|         | (Title of person signing)   |  |  |  |