P10000098058

(Requestor's Name)				
(Address)				
	(Address)			
	(City/State/Zip/Phone #)			
PICK-UF	WAIT MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

Office Use Only



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COVER LETTER

TO: Amendment Section

Division of Corporations				
SUBJECT: Cathleen Scott & Ass	sociates, P.A.			
DOCUMENT NUMBER: P100000	98058			
The enclosed Articles of Dissolution and	fee are submitted for filing.			
Please return all correspondence concerni	ng this matter to the following:			
Cath	leen Scott			
(Name o	f Contact Person)			
Cathleen Scott	& Associates, P.A.			
(Firm/Company)				
250 South Cent	ral Blvd., Suite 104A			
(.	Address)			
Jupit	er, FL 33458			
<u></u>	tate and Zip Code)			
For further information concerning this m	atter, please call:			
Debby Baker	at (561) 653-0008			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amo	unt:			
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	✓ \$43.75 Filing Fee & □\$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) Status & Certified Copy (Additional copy is enclosed)			
MAILING ADDRESS: Amendment Section	STREET ADDRESS: Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301			

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the comparation of currently filed with the Floride Denoutment of States				
riksi.	The name of the corporation as currently filed with the Florida Department of State:				
	Cathleen Scott & Associates, P.A.				
SECOND:	The document number of the corporation (if known): P10000098058				
THIRD:	The file date of the articles of incorporation: 12/3/2010				
FOURTH:	(CHECK AT LEAST ONE BOX)				
	None of the corporation's shares have been issued.				
	The corporation has not commenced business.				
FIFTH:	No debt of the corporation remains unpaid.				
	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.				
SEVENTH:	Adoption of Dissolution (CHECK ONE)				
	A majority of the incorporators authorized the dissolution.				
A majority of the directors authorized the dissolution.					
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.)				
	Cathleen Scott				
	(Typed or printed name of person signing)				
	President (Title of Person Signing)				
	(This of Fernance)				

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: Cathleen Scott & Ass	ociates, P.A.	-
	n will be the date the dissolution is fil rticles of Dissolution.	led with the Department of State or as	
Description of inf	formation that must be included in a cl	laim:	
name of cla	imant;		
amount of	olaim;		
basis for cla	im including documentati	on; and	
date of clair	n		
,			
	where claims can be sent: (Claims can	not be sent to the Division of Corporations))
		Juile 1047	
<u> </u>	upiter, FL 33458		
-			
_			
A claim against th within 4 years afte	e above named corporation will be bater the filing of this notice.	arred unless a proceeding to enforce the clai	im is commenced
			. 1
	Cathleen Scott	$\underline{}$	
	Printed Name of the Person Filing	Signature of the Person Fi	ling

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