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(Re	questor's Name)	<u>.</u>
(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 I	Filing Officer:	

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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations
SUBJECT: DIGGULATION of SMUKEY MOUNTAIN VENTURES TA
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DUNNA GODWIN, PRESIDENT (Name of Contact Person)
SMULLY MEN STATURES INC (Firm/Company)
$\frac{POBox37}{\text{(Address)}}$
WORTHINGTON GANINGS, FL 32697-0037 (City/State and Zip Code)
For further information concerning this matter, please call:
Evich Weyney at (352) 371-1040 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FILED

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution: IALLAHASSEE, FLORIDA FIRST: The name of the corporation as currently filed with the Florida Department of State: The document number of the corporation (if known): SECOND: The file date of the articles of incorporation: THIRD: 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. SIXTH: 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.) President

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.

Printed Name of the Person Filing

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Name of Corporation: SMUKGY MOUNTAIN VENTURGE DWC Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: DATE INCURRED BALANCE DUE CINCLUDING LATE PEES NAME OF CREDITOR ADPACES OF CHEDITOR PHUNE H OF CREDITOR Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 11.0. BOX 37 WONTHINGTON SPRINGS, FL. 32697-0037 A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

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