## P110000085649

| (Re                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
| (Ac                     | ldress)            |             |
| (Ac                     | ddress)            |             |
| (Ci                     | ty/State/Zip/Phon  | e #)        |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Ви                     | usiness Entity Nar | me)         |
| (Do                     | ocument Number)    |             |
| Certified Copies        | _ Certificate:     | s of Status |
| Special Instructions to | Filing Officer:    |             |
|                         |                    |             |
|                         |                    |             |
|                         |                    |             |
|                         |                    |             |

Office Use Only



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AMD135.

## **COVER LETTER**

| TO: Amendment Section Division of Corporations                                                                                                                                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SUBJECT: HUTCHESON PROPERTY PRESERVATION, FIXC                                                                                                                                                  |
| DOCUMENT NUMBER: P//000085649                                                                                                                                                                   |
| The enclosed Articles of Dissolution and fee are submitted for filing.                                                                                                                          |
| Please return all correspondence concerning this matter to the following:                                                                                                                       |
| LEROME R. MAUREN JR.                                                                                                                                                                            |
| (Name of Contact Person)                                                                                                                                                                        |
| Mc bnaw and Manen Accounting The  (Firm/Company)                                                                                                                                                |
| (Firm/Company)                                                                                                                                                                                  |
| 1216 NW 13TH STREET                                                                                                                                                                             |
| 1216 NW 13TH STREET<br>(Address)<br>GAINESVILLE PL 32601                                                                                                                                        |
| - CAINESVILLE 12 32601                                                                                                                                                                          |
| (City/State and Zip Code)                                                                                                                                                                       |
| For further information concerning this matter, please call:                                                                                                                                    |
| (Name of Contact Person) at (352) 374-6789  (Area Code & Daytime Telephone Number)                                                                                                              |
| (Name of Contact Person) (Area Code & Daytime Telephone Number)                                                                                                                                 |
| Enclosed is a check for the following amount:                                                                                                                                                   |
| \$35 Filing Fee \$\to\$ \$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)              |
| MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:  HYTCH ESON PROPERTY PRESCRUATION FULL  The document number of the corporation (if known): P110000 85649  The date dissolution was authorized: MARCH 24, 2014                                                       |
|---------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SECOND: | The document number of the corporation (if known): P110000 85649                                                                                                                                                                                                                                         |
| ГHIRD:  | The date dissolution was authorized: MANCH 24, 2014                                                                                                                                                                                                                                                      |
|         | 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 of other officer - if directors or officers have not been selected, by an incorporation if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)  ADYCE HUTCHESON  (Typed or printed name of person signing) |
|         | (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 Corporation: HUTCHESON Property Preseason Truc.

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, VENDOR / CUSTONER NAME/

SENJEE PERFORMED APPROVED KND

Acceptance Documents

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

19716 715T AVERNE STANKE FL 32091

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.

OYCE PLUTCHESON

Printed Name of the Person Filing

enature of the Person Filing

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