## P11000088472

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

Office Use Only



400255627094

01/15/14--01008--015 \*\*35.00

14 JAN 15 PM 1: 30

C. LEWIS

JAN 2 3 2614

EXAMINER

## COVER LETTER \*

TO: Amendment Section

Division of Corporations
SUBJECT: Articles of Dissolution
DOCUMENT NUMBER: EIN 45-3360128
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
James R. Loyed (Name of Contact Person)
Loyed Enterprises Inc. (Firm/Company)
447 Alma Rd (Address)
De Funiak Springs Florida 32433 (City/State and Zip Code)
For further information concerning this matter, please call:
Tames R. Loyeo at (850) 333 0810  (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 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:			
	LOYED Enterprises Inc Dunno 88472			
SECOND:	The document number of the corporation (if known): EIN 45-3360128			
THIRD:	The date dissolution was authorized: $\frac{12-31-2013}{}$			
	Effective date of dissolution if applicable: 12-31-2013 (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 voics east for dissolution was sufficient for approval by			
	Share Holders :: 3			
	Signature:  (By a directory 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)			
-	Tames R. Loyed  (Typed or printed name of person signing)			
	President (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: LOYED Enter PRISES Inc 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: Company Name / Detailed Reason / Date of Claim entact Person / Contact Phone number Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Defuniar Springs FL 32433 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