P11000090551

(Re	equestor's Name)	
(Ac	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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MAIS WINDER

COVER LETTER

TO: Amendment Section

Division of Corporations				
SUBJECT: Articles of Dissolution				
DOCUMENT NUMBER: PN00090551				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Sheery Campbell (Name of Contact Person)				
Gibby's Cubbybole Adventures, The (Firm/Company)				
100 10th Street (Address)				
Sound Cloud, Fl 34769 (City/State and Zip Code)				
For further information concerning this matter, please call:				
Shees Campbell at (40) 414-8225 (Name of Contact Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status \$\Bigcup \\$52.50 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certificate of Status & 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 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name	of the corpo	oration as curren	tly filed with the Flo	orida Depar	tment o	f Stat	e:
	<u>(Bi</u>	bby ¹ 5 (elodyddu	Adventures	, Doc		_	
SECOND:	The docu	ment numbe	r of the corporat	ion (if known): <u>P\</u>	1000009	0551	L	
THIRD:	The file date of the articles of incorporation: 10/17/2011							
FOURTH:	(CHECK	AT LEAST	ONE BOX)					
		None of the	corporation's sh	ares have been issue	ed.			
	9	The corpora	ition has not con	nmenced business.				
FIFTH:	No debt o	f the corpora	ation remains un	paid.				
SIXTH:			orporation remainshares were issue	ning after winding u ed.	p have beer	n distrib	uted	
SEVENTH:	Adopt	ion of Disso	lution (CHECk	(ONE)			14	
	\$	A majority	of the incorpora	tors authorized the d	lissolution.		FEB	П
		A majority	of the directors	authorized the disso	lution.		28	
							PH 4: 58	D
Sign	ature: (By a di in the h	scetor, president ands of a receive	or other officer - if dier, trustee, or other co	rectors or officers have no urt appointed fiduciary, by	t been selected, that fiduciary.	, by an inc	orporat	_ or - if
		<u>ل</u>	herey Can (Typed or printe	spell d name of person signing)				
			Pr	res.		_		
			(Title o	f 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: Cibby's Cubbythole Alventures, The
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
This buisness was disolved March 8 2012. All forms
were filed with DRS. If you have any questions or
Concerns you may reach me at 407-414-8225.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
100 10th Street
Soint Cloud, Fl 34769
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.
Sheery Campbell Sherry angle Signature of the Person Filing Signature of the Person Filing