

P14 000068466

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

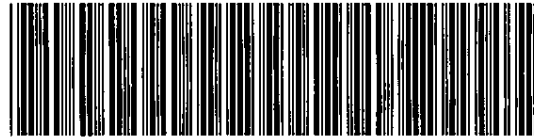
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 07 2015
C. CARROTHERS

JONES, JACKSON & MOLL, PLC

ATTORNEYS AT LAW
401 North 7th Street
Post Office Box 2023
Fort Smith, Arkansas 72902-2023

ROBERT L. JONES, JR. (1922-2004)
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KATHRYN A. STOCKS*
MICHAEL T. NEWMAN**
JOSHUA T. CARSON

TELEPHONE (479) 782-7203
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Sender's e-mail
kstocks@jjmlaw.com

December 30, 2014

* Licensed in Oklahoma
** Licensed in Oklahoma and Missouri

Florida Department of State
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

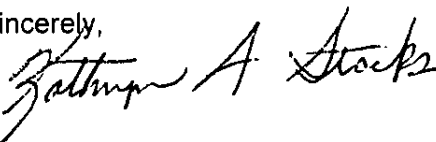
Re: Polpam Enterprises, Inc.

Dear Sir or Madam:

Enclosed please find the Cover Letter, Articles of Dissolution, and Notice of Corporate Dissolution that have been prepared in connection with the above referenced entity for filing in your office. Also enclosed is a check in the amount of \$43.75 for the filing fee and Certificate of Status.

Please contact me if you have any questions and thank you for your assistance in this matter.

Sincerely,



Kathryn A. Stocks

KAS/aw
Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Polpam Enterprises, Inc.

DOCUMENT NUMBER: P14000068466

The enclosed Articles of Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kathryn A. Stocks

(Name of Contact Person)

Jones, Jackson & Moll, PLC

(Firm/Company)

401 N. 7th Street

(Address)

Fort Smith, AR 72901

(City/State and Zip Code)

For further information concerning this matter, please call:

Kathryn A. Stocks

(Name of Contact Person)

at (479) 782-7203

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee ☒ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & 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:
Polpam Enterprises, Inc.

SECOND: The document number of the corporation (if known): P14000088468

THIRD: The date dissolution was authorized: December 15, 2014
Effective date of dissolution if applicable: same as filing date
(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 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)

Pamela G. Kelly

(Typed or printed name of person signing)

Director/Vice 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: Polpam Enterprises, 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*.

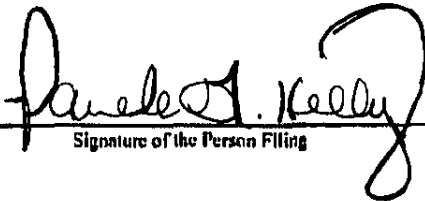
Description of information that must be included in a claim:

Name of Creditor
Address
Amount Owed
Basis of Claim

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

Polpam Enterprises, Inc.
110 West Seascapes Drive
Port Saint Joe, FL 32456

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.

<u>Pamela G. Kelly</u>	
Printed Name of the Person Filing	Signature of the Person Filing

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