

P17000020863

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700313120477

700313120477
05/03/18--01003--006 **43.75

MD

R. WHITE

MAY 10 2018

RECEIVED
MAY 8 2018
18 MAY - 8 PM 5:43

RECEIVED
MAY 8 2018
18 MAY - 8 AM 8:29
SEATTLE
TALLAHASSEE FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 9, 2018

CAPITOL SERVICES
WALK IN
TALLAHASSEE, FL

SUBJECT: TAX RECEIVABLE CORPORATION
Ref. Number: P17000020863

RECEIVED
DEPARTMENT OF STATE
10 MAY - 9 PM 4:44

We have received your document for TAX RECEIVABLE CORPORATION and the authorization to debit your account in the amount of \$43.75. However, the document has not been filed and is being returned for the following:

Part three must be completed with the date the dissolution was authorized.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist, II

Letter Number: 618A00009546

Attn: Rebekah White

*** Please give original
Submission date as file
date - 5/8/18 ***



**CAPITOL
SERVICES**

Filing Cover Sheet

To: Florida Division of Corporations

From: Kim Tadlock C/O Capitol Services, Inc.

Date: 5/8/2018

Trans#: 975869

Entity Name:

~~11 TAX RECEIVABLE CORPORATION~~

Articles Incorporation ()

Articles of Amendment ()

~~Articles of Dissolution (XX)~~

Annual Report ()

Conversion ()

Fictitious Name ()

Foreign Qualification ()

Limited Liability ()

Limited Partnership ()

Merger ()

Reinstatement ()

Withdrawal / Cancellation ()

Other ()

~~STATE FEES PREPAID WITH CHECK#1216 FOR \$43.75~~

PLEASE RETURN:

~~Certified Copy (XX)~~

Plain Photocopy ()

Good Standing ()

Certificate of Fact ()

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution

DOCUMENT NUMBER: P17000020863

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

Please return all correspondence concerning this matter to the following:

Rick L. Warren

(Name of Contact Person)

Hartzog Conger Cason & Neville

(Firm/Company)

201 Robert S. Kerr Avenue, 1600 Bank of Oklahoma Plaza

(Address)

Oklahoma City, OK 73102

(City/State and Zip Code)

For further information concerning this matter, please call:

Cheryl McDaniel

(Name of Contact Person)

at (405)235-7000

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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:
TAX RECEIVABLE CORPORATION

SECOND: The document number of the corporation (if known): P17000020863

THIRD: The date dissolution was authorized: September 1, 2017

Effective date of dissolution if applicable: September 1, 2017

(no more than 90 days after dissolution file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

FOURTH: Adoption of Dissolution (CHECK ONE)

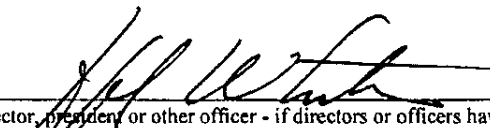
☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ 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 or in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

JEFF WHITE

(Typed or printed name of person signing)

President

(Title of person signing)

FILED
18 MAY -8 AM 8:20
STATE OF FLORIDA
TALLAHASSEE