# P93000012630

. (Re	questor's Name)		
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(Cit	y/State/Zip/Phone	e #)	
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C.COULLIETTE

APR 13 2010

EXAMINER

#### **COVER LETTER**

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations		
SUBJECT:		
DOCUMENT NUMBER: P930	00012630	
The enclosed Articles of Dissolution and fee a	are submitted for filing.	
Please return all correspondence concerning the	is matter to the following:	
Joy M. SEGNO (Name of C	6	
The Gifts of Toy	Contact Person)	
48 B. Indian	Company) Bayon, Drewei	
Jestin, FL 3254	dress)	
(City/State a	and Zip Code)	
For further information concerning this matter,	please call:  at (\$\frac{850}{}\) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
(Name of Contect Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	850 - 687 - 0945	
	□ \$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:	STREET ADDRESS:	
Amendment Section Division of Corporations	Amendment Section	
P.O. Box 6327	Division of Corporations Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 19, 2010

JOY M. SEGNO THE GIFTS OF JOY, INC. 48 INDIAN BAYON DR DESTIN, FL 32541

SUBJECT: THE GIFTS OF JOY, INC.

Ref. Number: P93000012630

We have received your document for THE GIFTS OF JOY, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

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) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 510A00006862

### **COVER LETTER**

SUBJECT: The gifts of Joy, he.	
DOCUMENT NUMBER: P 93000012630	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Joy Morelli SEGNO (Name of Contact Person)	
11 10	
The Difts of Joy Sic.	
COO Book 5144	
(Address)	
Destis . FL. 32540	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Contact Jerson) at (850) 837-5656  (Area Code & Daytime Telephone Number	<u> </u>
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)	
MAILING ADDRESS: Amendment Section  STREET ADDRESS: Amendment Section	
Division of Corporations Division of Corporations	
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 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:	
SECOND:	The document number of the corporation (if known): P 30000 /	263	0
THIRD:	The date dissolution was authorized:		
	Effective date of dissolution if applicable: 13-31-2009 (no more than 90 days after dissolution)	file date)	<del></del>
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cast f was sufficient for approval.	or dissol	ution
	Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting group ento vote separately on the plan to dissolve:	ıtitled	
	The number of votes cast for dissolution was sufficient for approval by		
		10	SIVIS
	(voting group)	0 APR 13	SE PART
	Signature: Mylgre	AM   :	ORPORATI
	(By a director, president of other officer - 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)	0,1	S.
	Joy M. SEGNO		
	(Typed or printed name of person signing)		
	Tresident (Title of person signing)	•	
	(Time of bergon arguing)		

Filing Fee: \$35