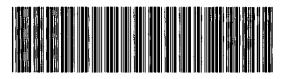
# P93000027796

(Red	questor's Name)		
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Bus	siness Entity Na	me)	
(Document Number)			
Certified Copies	. Certificate	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



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**EXAMINER** 

Law Offices of Sandra Sanders, P.A. 18 East Oak Street Arcadia, FL 34266 (863) 491-5003 Telephone (863) 491-5005 Facsimile sandysanders@embarqmail.com

November 5, 2010

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

> Re: Name of Corporation: Dees' Citrus, Inc.

Document Number: P93000027796

### To Whom It May Concern:

Enclosed are the following for filing purposes:

- Check number 4936 in the sum of \$35.00 which represents the filing fee; 1.
- 2. Cover Letter:
- 3. Articles of Dissolution; and
- Notice of Corporate Dissolution.

If you should have any questions, please do not hesitate contact my office.

Sincerely,

Sandra Sanders

SS/pmd Enclosures cc: client

# **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Dees' Citrus, Inc.	
DOCUMENT NUMBER: P9300002	27796
The enclosed Articles of Dissolution and fe	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Deborah A	A. Halvorson
(Name of C	Contact Person)
(Firm/Company)	
1346 NE H	lansel Avenue
(Ac	ldress)
Arcadia	, FL 34266
(City/Stat	e and Zip Code)
For further information concerning this mate	ter, please call:
Deborah A. Halvorson	at ( 863 ) 494-5262  (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount	nt:
\$35 Filing Fee \$\sum \$\\$43.75 Filing Fee &   Certificate of Status	\$43.75 Filing Fee & \$\sum \$\$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  \$\$\$S2.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee El 22314	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	f State:	
	Dees' Citrus, Inc.		
SECOND:	The document number of the corporation (if known): P93000027796		
THIRD:	The date dissolution was authorized: November 2, 2010		
	Effective date of dissolution if applicable: (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 was sufficient for approval.	for dissolution	
	Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting group e to vote separately on the plan to dissolve:	ntitled	
	The number of votes cast for dissolution was sufficient for approval by	10 NOV -8	
	(voting group)	OF C	
	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)	CORPORATIONS	
	Deborah A. Halvorson		
	(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: Dees' Citrus, Inc.
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:
Name and address of claimant
Nature and basis of claim
Date claim arose
Amount of claim
Copy of documentation forming basis of claim, if applicable
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Deborah A. Halvorson
1346 NE Hansel Avenue
Arcadia, FL 34266
·
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