

P93000064703

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

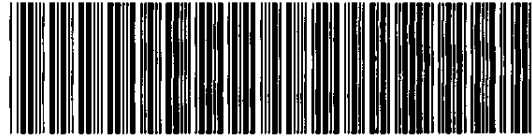
(Document Number)

Certified Copies _____

Certificates of Status ☒

Special Instructions to Filing Officer:

Office Use Only



400207935724

07/28/11--01003--009 **43.75

FILED
11 JUL 27 PM 4:30
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Voldis
Teevis

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Notice of Company Closing

DOCUMENT NUMBER: P93D000064703

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

Please return all correspondence concerning this matter to the following:

BEE LETOURNEAU
(Name of Contact Person)

CONNORS Carriage Inc
(Firm/Company)

PO Box 373192
(Address)

Satellite BEACH FL 32937-1192
(City/State and Zip Code)

For further information concerning this matter, please call:

BEE LETOURNEAU at (321) 773-8226
(Name of Contact Person) (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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 JUL 27 AM 8:01

RECEIVED

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:

Connors Carriage INC

SECOND: The document number of the corporation (if known): P93000064703

THIRD: The date dissolution was authorized: July 22, 2011

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 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

Sole Director / Sole Shareholder
(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)

BEE LETOURNEAU
(Typed or printed name of person signing)

Sole Director
(Title of person signing)

Filing Fee: \$35

FILED
11 JUL 27 PM 4:30
SECRETARY OF STATE
TALLAHASSEE FLORIDA