94000010440

(Requ	estor's Name)
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Pho	ne #)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Na	ame)
(Dоси	ment Numbe	r)
Certified Copies	Certificate	es of Status
Special Instructions to Fili	ng Officer:	

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: HOMESTEAD MAI	NASEMENT INC
DOCUMENT NUMBER: P94000	2010440
The enclosed Articles of Dissolution and fe	ee are submitted for filing.
Please return all correspondence concerning	this matter to the following:
LINDSAY OXLEY (Name of)	
(Name of I	Person)
HOMESTEAD MANAGEMENT	INC
(Name of I	Firm/Company)
SOH, LOST CREEK COURT	
	(Address)
KISSIMMEE FL 34-	743
(City/S	tate/and Zip Code)
For further information concerning this mat	ter, please call:
LINDSAY OXLEY	at (407) 518 7433 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amoun	nt:
\$35 Filing Fee \$2 \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 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 409 E. Gaines Street
Tallahassee, Florida 32314	Tallahassee, Florida 32399

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 Department of State
	HOMESTEAD MANAGEMENT INC
SECOND:	The document number of the corporation (if known): P940000 10400 = T
THIRD:	The date dissolution was authorized:
	Effective date of dissolution if applicable: DE 31.03. (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 of 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)
	Signed this 374 day of DECEMBER , 2008.
Signat	(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)
	LINDSAY ON EY
	(Typed or printed name of person signing)
	GMPANY SECRETARY

Filing Fee: \$35