## P94000031926

(Req	uestor's Name)	
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(City	/State/Zip/Phone #	<i>‡</i> )
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DIVISION OF CORPORATIONS

OP MAR 30 PH 12: 26

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations		
SUBJECT: Close / Dissolution of Corporation		
DOCUMENT NUMBER: P94000031926	<del>.</del>	
The enclosed Articles of Dissolution and fee are submitted	for filing.	
Please return all correspondence concerning this matter to the	he following:	
Barbara J Shepard		
(Name of Contact Person) PAY-DAY CHECK CASHERS,INC		
(Firm/Company)		
N 685 State Highway 187		
(Address)		
Shiocton WI. 54170		
(City/State and Zip Code)	)	
For further information concerning this matter, please call:		
Barbara Shepard at ( 920		
(Name of Contact Person) (Area	Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
▼\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Certified Cop (Additional coenclosed)		
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 607.1401, 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	:
	PAY-DAY CHECK CASHERS, INC.	
SECOND:	The document number of the corporation (if known): P94000031926	
THIRD:	The file date of the articles of incorporation: 4-25-1994	
FOURTH:	(CHECK AT LEAST ONE BOX)	9
	None of the corporation's shares have been issued.	09 MAR 30 PH 12: 26
	The corporation has not commenced business.	30 P
FIFTH:	No debt of the corporation remains unpaid.	
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	26
SEVENTH:	Adoption of Dissolution (CHECK ONE)	,
	A majority of the incorporators authorized the dissolution.	
	A majority of the directors authorized the dissolution.	
Sign	atura:	
Sign	(By a director, president or other officer if directors or officers have not been selected, by an incorporator in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	r - if
	Barbara J Shepard	
	(Typed or printed name of person signing)	
	President	
	(Tide of Domon Coming)	

Filing Fee: \$35