## P94000044516

(Requestor's Name)					
(Address)					
(Address)					
(Addiess)					
(City/State/Zip/Phone #)					
, , , , , ,					
PICK-UP WAIT MAIL					
FICK-OF WAIT IVIAIL					
(Pusings Entity Name)					
(Business Entity Name)					
(Document Number)					
•					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



500112682295

12/05/07---01021---002 \*\*43.75

FILED

07 DEC -5 AM 9: 18

SECRETARY OF STATE

(1,6,5)

## **COVER LETTER**

**TO:** Amendment Section

**Division of Corporations** DOCUMENT NUMBER: P94000044516 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JOHN M. GARMHAUSEN (Name of Contact Person) FAULKNER, GARMHAUSEN, KEISTER & SHENK, A Legal Professional Association (Firm/Company) Courtview Center - Suite 300, 100 South Main Avenue (Address) Sidney, Ohio 45365 (City/State and Zip Code) For further information concerning this matter, please call: at ( 937 ) 492-1271

(Area Code & Daytime Telephone Number) John M. Garmhausen (Name of Contact Person) Enclosed is a check for the following amount: S35 Filing Fee ✓\$43.75 Filing Fee & S2.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) STREET ADDRESS: **MAILING ADDRESS:** Amendment Section 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	t of Sta	ite:	
	Phase XV, Inc.	_		
SECOND:	The document number of the corporation (if known): P94000044516			
THIRD:	The date dissolution was authorized: November 27, 2007			
	Effective date of dissolution if applicable: (no more than 90 days after dissolution)	ion file da	ate)	<del></del>
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes carwas sufficient for approval.	st for d	issolu	ıtion
	Dissolution was approved by the shareholders through voting groups.			
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitle ≧⊊	ed O	
	The number of votes cast for dissolution was sufficient for approval by	CRETAR)	7 DEC -5	
	(voting group)	OF STATE E. FLORIDA	AM 9: 18	
	Signature: House E. Moureles.  (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)			
	Thomas E. Shoemaker			
	(Typed or printed name of person signing)			
	Director			
	(Title of person signing)			

Filing Fee: \$35