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## **COVER LETTER**

TO: Amendment Section

Division of Corporations		
SUBJECT: SUMMERDALE NURSERY, INC		
DOCUMENT NUMBER: P94000045377		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
PAT REEMAN		
(Name of Person)		
SUMMERDALE NURSERY, INC		
(Name of Firm/Company)		
14226 COUNTY LINE RD		
(Address)		
HUDSON, FLORIDA 34667		
(City/State/and Zip Code)		
For further information concerning this matter, please call:		
PAT REEMAN at (727) 856 0449 (Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \bigcup \\$43.75 Filing Fee & \bigcup \\$52.50 Filing Fee,  Certificate of Status Certified Copy Certificate of Status & Certified Copy (Additional copy is enclosed)  (Additional copy is enclosed)		
MAILING ADDRESS: STREET ADDRESS:		
Amendment Section Amendment Section  Division of Corporations Division of Corporations		
P.O. Box 6327 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 Florida Department of State:		
	SUMMERDALE NURSERY, INC.		
SECOND:	The document number of the corporation (if known): P9400045347		
THIRD:	The date dissolution was authorized: John 8 2005		
	Effective date of dissolution if applicable: July 10 2005 (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 <u>20</u> day of <u>JULY</u> . <u>2005</u> .		
	Signature: 8 mh coman		
	(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)		
	PAT REEMAN		
	(Typed or printed name of person signing)		
	OWNER/ SECRETARY		
	(Title of person signing)		

Filing Fee: \$35