

P94000074962

Requestor's Name

Cheryl M. Martin
Certified Public Accountant
One Scenic Central • Suite 106
Lake Wales, FL 33853

ne #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #) 400002451054--3
-03/03/98--01115--019
*****35.00 *****35.00
3. _____
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- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/ Director
	Change of Registered Agent
<input checked="" type="checkbox"/>	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/ QUALIFICATION	
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

FILED
98 MAR -9 AM 10:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dee 3/11



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

February 26, 1998

CHERYL MARTIN
1 SCENIC CENTRAL, SUITE 106
LAKE WALES, FL 33853

SUBJECT: BLUE CHIP MANUFACTURING, INC.
Ref. Number: P94000074962

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

The fee to file articles of dissolution or a certificate of withdrawal is \$35. For each certified copy requested, please add an additional \$52.50.

If you have any questions concerning the filing of your document, please call (850) 487-6916.

Carol Mustain
Corporate Specialist

Letter Number: 698A00011017

ARTICLES OF DISSOLUTION

55
FILED
98 MAR -9 AM 10:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation is: Blue Chip Manufacturing, Inc.

SECOND: The date dissolution was authorized: 12/30/97

THIRD: 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 vote 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 31 day of December, 19 97

Signature
(By the Chairman or Vice Chairman of the Board, President, or other officer)

Adrienne Swanick
(Typed or printed name)

Secretary / Treasurer
(Title)

RECEIVED
98 FEB 18 PM 4:05
FLORIDA DEPT. OF REVENUE