

Florida Department of State
Division of Corporations
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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : CLARK, PARTINGTON, HART AND HART

Account Number : 071201002016

Phone : (850) 434-9200

Fax Number : (850) 432-7340

EFFECTIVE DATE
4-1-2010

DISSOLUTION OR WITHDRAWAL
LACTATION ASSOCIATES OF NORTHWEST FLORIDA, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

RECEIVED

2010 MAR 24 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2010 MAR 24 PM 2:54

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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:

LACTATION ASSOCIATES OF NORTHWEST FLORIDA, INC.

SECOND: The document number of the corporation (if known): P95000029715

THIRD: The date dissolution was authorized: March 1, 2010

Effective date of dissolution if applicable: April 1, 2010
(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 the shareholders through voting groups.

EFFECTIVE DATE

4-1-2010

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)

Signature: 

(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)

Amy J. Barton

(Typed or printed name of person signing)

President/Director

(Title of person signing)

Filing Fee: \$35

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TALLAHASSEE, FLORIDA

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Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: LACTATION ASSOCIATES OF NORTHWEST FLORIDA, INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

Name of claimant

Amount owed to claimant

Explanation of basis of claim/debt

Invoice (or copy of invoice if previously submitted)

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

c/o Amy J. Barton

100 W. Gadsden Street

Pensacola, FL 32501

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Amy J. Barton, President/Director

Printed Name of the Person Filing


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00

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