P950000 42081

î.			
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
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SECRETARY OF STATE

APPRUVES



COVER LETTER

Division of Corporations	
SUBJECT: Dissolution of Corporat	tion
DOCUMENT NUMBER: P950000420	81
The enclosed Articles of Dissolution and fee are	submitted for filing.
Please return all correspondence concerning this	matter to the following:
Evelyn A. Johnson (Name of Contact	ct Person)
(Firm/Com	Xtra Discourt Drugs - Haines City INC
6953 Gall Blvd.	·
(Address	
Zephyrhills, FL 33542	
(City/State and	Zip Code)
For further information concerning this matter, pl	ease call:
Evelyn A. Johnson (Name of Contact Person)	At (813) 788-7885 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
(Ad	3.75 Filing Fee & S52.50 Filing Fee, tified Copy Certificate of Status & ditional copy is Certified Copy (Additional copy is enclosed)
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 607.1403, 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:			
	X-tra Discount Drugs-Haines City, Inc.				
SECOND:	The document number of the corporation (if known): P95000042081				
THIRD:	The date dissolution was authorized: 12/31/09				
	Effective date of dissolution if applicable: 12/31/09 (no more than 90 days after dissolution f	ile date)			
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes east for dissolution was sufficient for approval.				
	Dissolution was approved by 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				
		3 0 5			
	(voting group)	AUG			
	Signature Culcul Adult (By a director, president or other officer - if directors or officers have not been selected, by	13 PH 2: WI	AND		
	an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	₩			
	Evelyn A. Johnson (Typed or printed name of person signing)				
	(1) beg of brown figure of hersoft sthrug)				
	Ore SIDE UT (Title of person signing)				
	(Yung or betsou signific)				

Filing Fee: \$35