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NURSERIES NATIONWIDE DELIVERY, INC.
510 JASMINE ROAD • ST. AUGUSTINE, FL 32086

Office Use Only

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

1. _____ (Corporation Name) _____ (Document #) **100003350721--0**
-08/09/00--01049--009
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NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☒ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

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Examiner's Initials

AL 8/18

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 is: NURSERIES NATIONWIDE
DELIVERY, INC.

SECOND: The date dissolution was authorized: 07 ^{AUG} ~~SEP~~ 00

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

President, Vice President, Sec. Treasurer
(voting group)

Signed this 7th day of September ~~August~~, 2000

Signature Lance H. Camp (904-794-0824)
(By the Chairman or Vice Chairman of the Board, President, or other officer)

LANCE H. CAMP
(Typed or printed name)

SEC-Treasurer
(Title)

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