

P95000073945

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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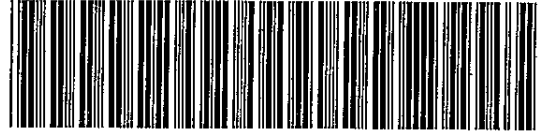
(Business Entity Name)

(Document Number)

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07/14/04--01021--022 **52.50

FILED
04 JUL 14 AM 8:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Valid w/notice

*75
7/21*



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PLEASE REPLY TO: ORLANDO

E-MAIL ADDRESS
kwankelman@mateerharbert.com

DIRECT LINE
(407) 418-1313 EXT. 129

July 12, 2004

Florida Department of State
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: The Best Selection of Orlando, Inc.

Dear Sir/Madam:

Please file the enclosed Articles of Dissolution and Notice of Corporate Dissolution and return the Certificate of Status and certified copy of the Articles to the undersigned. This firm's check in the amount of \$52.50 representing the related fees for same is enclosed.

Very truly yours,

Karen W. Wankelman

KWW:lad
Enclosures

cc: Karena Ganem

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Best Selection of Orlando, Inc.

DOCUMENT NUMBER: P95000073945

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Karen W. Wankelman

(Name of Person)

Mateer & Harbert, P.A.

(Name of Firm/Company)

P.O. Box 2854

(Address)

Orlando, FL 32802

(City/State/and Zip Code)

For further information concerning this matter, please call:

Karen W. Wankelman

(Name of Person)

at (407) 418-1313 Ext. 129

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☒ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

ARTICLES OF DISSOLUTION

FILED
04 JUL 14 AM 8:55
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 as currently filed with the Department of State:

The Best Selection of Orlando, Inc.

SECOND: The document number of the corporation (if known): P95000073945

THIRD: The date dissolution was authorized: June 23, 2004

Effective date of dissolution if applicable: _____
(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 30th day of June, 2004

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)

Dennis Gerger

(Typed or printed name of person signing)

Director

(Title of person signing)

Filing Fee: \$35

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: The Best Selections of Orlando, 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:

Vendor name and contact information
nature of claim including specific invoice numbers
amounts, dates etc.

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

c/o James Scuffin
WG Best
7611 Conway Ct
San Diego CA 92111

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.

Dennis Gerger
Printed Name of the Person Filing

[Signature]
Signature of the Person Filing

04 JUL 14 AM
SECRETARY OF STATE
TALLAHASSEE, FLORIDA