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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: JONES, FOSTER, JOHNSTON & STUBBS, P.A.

Account Number : 076077003231 Phone

: (561)650-0471

Fax Number

: (561)650-5300

DISSOLUTION OR WITHDRAWAL EATON FINE ART, INC.

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

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ARTICLES OF DISSOLUTION

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

The name of the corporation as currently filed with the Florida Department of State: Eaton Fine Art, Inc.	
The document number of the corporation (if known): P95000093662	
The date dissolution was authorized: February 29, 2016	
Effective date of dissolution if applicable: February 29, 2016 (no more than 90 days after dissolution file date)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.	
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.	
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 approved by	
(voting group)	
CHATA.	
Signature:	
(B) 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)	
Timothy A. Eaton	
(Typed or printed name of person signing)	
President	
(Tiple 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:
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
Address of Claimant
Nature of the Claim
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 5005 South Olive Avenue
West Palm Beach, FL 33405
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.
Timothy A. Eaton, President
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