

P96000050028

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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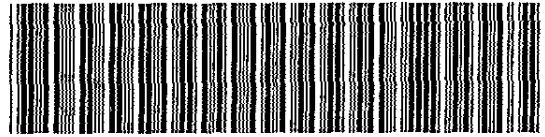
(Business Entity Name)

(Document Number)

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12/19/03--01035--002 **35.00

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CLERK OF STATE
TALLAHASSEE, FLORIDA

Dissolution
mm
12/30/03

Hill & Company

CPA, P.A.

CERTIFIED PUBLIC ACCOUNTANTS

1318 Lafayette Street
Cape Coral, FL 33904
(239) 549-2444
Fax: (239) 549-5623
www.hillcocpa.com

Royal Palm Square
1400 Colonial Blvd., Suite 17
Fort Myers, FL 33907
(239) 433-2444
Fax: (239) 275-3917

November 20, 2003

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

RE: Dissolution of JAKOB KAHLES, INC.

Dear Sirs:

Enclosed please find the Articles of Dissolution for the above identified Corporation, and a check in the amount of \$35.00 for the filing fee.

Please direct any questions and your response to the following address: Hill & Company, CPA, 1318 Lafayette Street, Cape Coral, Florida 33904.

Thank you.



Thomas W. Hill
Hill & Company, CPA, P.A.

Enclosures

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: JAKOB KAHLES, INC.

SECOND: The date dissolution was authorized: 11/20/03

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:

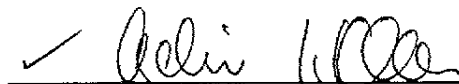
The number of votes cast for dissolution was sufficient for approval by

(voting group)

Signed this _____ day of November,

200

Signature

✓ 

(By the Chairman or Vice Chairman of the Board, President, or other officer)

✓ Achim J. Kahles

(Typed or printed name)

Director

(Title)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA