P96000/0/3/8

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	tified Copies Certificates of Status	
Special Instructions to	Filing Officer:	
·		

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COVER LETTER

TO: Amendment Section Division of Corporations	•	* ,
SUBJECT: Dissolution of Smit	h & Sons De	ev. & Mgmt. Corp.
DOCUMENT NUMBER: P96000	101318	
The enclosed Articles of Dissolution and fe	e are submitted for t	filing.
Please return all correspondence concerning	this matter to the fo	llowing:
Raymond G. Robison		
(Name of C	Contact Person)	
Fox, Wackeen, Dungey,	et. al., L.L	.P.
(Firm	/Company)	
3473 SE Willoughby Bo	ulevard	
(Ad	dress)	
Stuart, Florida 34994	·	
(City/State	e and Zip Code)	
For further information concerning this matt	er, please call:	
Debbie Sigafoose	at (772	287-4444
(Name of Contact Person)		de & Daytime Telephone Number)
Enclosed is a check for the following amour	at:	
□ \$35 Filing Fee ■ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certificate of Status &
MAILING ADDRESS:	<u>s</u>	TREET ADDRESS:
Amendment Section		Amendment Section
Division of Corporations		Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building

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 o SMITH & SONS DEV. & MGMT. CORP.	f State	B:
SECOND:	The document number of the corporation (if known): P9600010131	8	
THIRD:	The date dissolution was authorized: February 28, 2014		
	Effective date of dissolution if applicable: (no more than 90 days after dissolution	file dat	e)
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for di	ssolution
	☐ Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting group e to vote separately on the plan to dissolve:	ntitled	1
	The number of votes cast for dissolution was sufficient for approval by	14 HA	~~;
	(voting group)	R 24	
		15 th 22	Ö
	Signature: (By a director, president or other officer—1f 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)		
	GERALD A. SMITH		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(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: SMITH & SONS DEV. & MGMT. CORP.

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 and Address of Claimant
Amount of Claim
Whether Claim is Secured or Contingent
Detailed Description of Type of Claim and Date Claim Arose
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) P.O. Box 188, Mena, Arkansas 71953
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.
Printed Name of the Person Filing Signature of the Person Piling

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00