Office Use Only



000176319950

04/19/10--01064--014 **35.00

COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations SUBJECT: Sallyards Corporation P97000050434 **DOCUMENT NUMBER:** The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Scott Sallyards (Name of Contact Person) Sallyards Corporation (Firm/Company) 1416 Fairway Oaks Drive (Address) Casselberry, Florida 32707 (City/State and Zip Code) For further information concerning this matter, please call: $\begin{array}{c} \text{at (\underline{407})} & \underline{341\text{-}3567} \\ \hline & \text{(Area Code \& Daytime Telephone Number)} \end{array}$ Scott Sallyards (Name of Contact Person) Enclosed is a check for the following amount: ✓\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section **Amendment Section Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle

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 of S | State: |
|---------|---|---------------------|
| | Sallyards Corporation | |
| SECOND: | The document number of the corporation (if known): P97000050434 | |
| THIRD: | The date dissolution was authorized: April 12, 2010 | |
| | Effective date of dissolution <u>if applicable</u> : April 12, 2010 (no more than 90 days after dissolution fil | e date) |
| FOURTH: | Adoption of Dissolution (CHECK ONE) | |
| | Dissolution was approved by the shareholders. The number of votes cast fo was sufficient for approval. | r dissolution |
| | Dissolution was approved by the shareholders through voting groups. | |
| | The following statement must be separately provided for each voting group ent to vote separately on the plan to dissolve: | itled |
| | The number of votes cast for dissolution was sufficient for approval by | |
| | (voting group) | . wike |
| | | 70 F |
| | Signature: State of the State of the Signature: State of the State of | 10 APR 19 AM 10: 55 |
| | (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) | M 10: 55 |
| | Scott F. Sallyards | |
| | (Typed or printed name of person signing) | |
| | President | |
| | (Title of person signing) | |

Filing Fee: \$35