P97000067854

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status

Special Instructions to Filing Officer:
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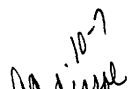
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SECRETARY OF STATE
ANTLAHASSEE, FLORIDO



COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: <u>DISSOLUTION</u> Century Reside.	of Corporation utual Lending, INC
DOCUMENT NUMBER: arknown	
The enclosed Articles of Dissolution and fee are s	submitted for filing.
Please return all correspondence concerning this m	natter to the following:
Jane of Contact	t Person)
(Firm/Comp	pany)
12408 Wexford HI. (Address)	lls no
(Address)	
Rovervozu F/ 3= (City/State and 2)	556 8
(City/State and 2	Zip Code)
For further information concerning this matter, ple	ase call:
Vames Lyons at (Name of Contact Person)	(813) 731-3051 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
(Add	.75 Filing Fee & \$\sum \\$52.50 Filing Fee, ified Copy Certificate of Status & Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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 State:
	Century Residential Lending, INC.
SECOND:	The document number of the corporation (if known): P970000 67854
THIRD:	The file date the articles of incorporation: 4/07/1998 (CHECK AT LEAST ONE BOX)
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	☐ The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Sign	ature: (By a effector, 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.)
	James D Lyon S (Typed or printed name of person signing)
	Pres, dent (Title of Person Signing)
	(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: Century Residential Lendowy Inc
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
Date debt in carred
Contact Name of individual who
flaced order
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
RUVERVIEW F1 33567
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.

Vanes D Lyons
Printed Name of the Person Filing