

Division of Corporations

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**P9800041873**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:  
Division of Corporations  
Fax Number : (950) 617-6390

From:  
Account Name : JOHN M WICKER PA  
Account Number : I20070000104  
Phone : (239) 939-2222  
Fax Number : (239) 939-2280

**DISSOLUTION OR WITHDRAWAL**  
**SEBRIE IMAGES RESORT PHOTOGRAPHY, INC.**

Certificate of Status	0
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Page Count	03
Estimated Charge	\$35.00

*Mwicker@lawcra.com*

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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AUG 17 2017

T. J. EMERY

Dis  
Notice

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## 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 State:  
SEBRJE IMAGES RESORT PHOTOGRAPHY, INC.
- SECOND:** The document number of the corporation (if known): P98000041873
- THIRD:** The date dissolution was authorized: 08/15/2017
- Effective date of dissolution if applicable: \_\_\_\_\_  
(no more than 90 days after dissolution file date)
- Notes:** 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.

- FOURTH:** 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 approval by

\_\_\_\_\_  
(voting group)

Signature: \_\_\_\_\_

(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)

MIKLUHA, KARI R.

\_\_\_\_\_  
(Typed or printed name of person signing)

PRESIDENT

\_\_\_\_\_  
(Title of person signing)

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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: SEBRIE IMAGES RESORT PHOTOGRAPHY, INC.

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 CREDITOR, PRODUCT OR SERVICE PROVIDED, TOTAL AMOUNT OF CLAIM, ACCOUNT

SUMMARY, INVOICES, AND REFERENCE TO CONTRACT, IF APPLICABLE

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

KARI MIKLUHA

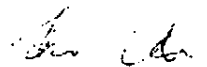
3601 SE 18TH AVE

CAPE CORAL, FL 33904

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.

KARI MIKLUHA

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

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