

P9800068459

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/02/07--01032--017 **52.50

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2007 FEB -2 AM 8:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

KHA
10/15

Brian K. Holden

**A/R Funding of the Southeast, Inc.
126 Millport Circle, Suite 100
Greenville, SC 29615
864.250.2107**

January 29, 2007

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**Re: A/R Funding of the Southeast, Inc.
Document Number: P98000068459**

The enclosed **Articles of Dissolution** and fee are submitted for filing.


Please return all correspondence concerning this matter to the following:

**Brian K. Holden
A/R Funding of the Southeast, Inc.
126 Millport Circle, Suite 100
Greenville, SC 29615**

For further information concerning this matter, please call:
Brian K. Holden 864.250.2107

Enclosed is a check for **\$52.50 for Filing Fee, Certificate of State & Certified Copy.**

Very truly yours,



Brian K. Holden

Enclosure

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:

A/R Funding of the Southeast, Inc.

SECOND: The document number of the corporation (if known): P9800006859

THIRD: The date dissolution was authorized: January 26, 2007

Effective date of dissolution if applicable: Upon filing
(no more than 90 days after dissolution file date)

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)

Brian K. Howard

(Typed or printed name of person signing)

Director

(Title of person signing)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: A/R Funding of the Southeast, 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 Claimant, Amount, Date Claim Arose and Basis of Claim.

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

126 Millport Circle, Suite 100

Greenville, SC 29615

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TALEAHASSEE, FLORIDA

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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.

BRIAN K. HOLDEN

Printed Name of the Person Filing

[Signature]

Signature of the Person Filing

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