P98000092905 Requester's Name

From



Ms. Nieka Vickers 919 Shadowlawn DR Tallahassee FL 32312-2445

385-1024

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1	
(Corporation Name)	(Document #)
2(Corporation Name)	(Document #)
3(Corporation Name)	(Document#) 400045863244 -09/12/0101073014 *****43.75 ******43.75
4(Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait	Certified Copy Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other OTHER FILINGS Annual Report Fictitious Name	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other Amendment SECRETATION/OFFICE SECRETAT

CR2E031(7/97)

Examiner's Initials ATO

9-19-2001

FFECTIVE DATE

ARTICLES OF DISSOLUTION

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

2001 SEP 19 PM 12: 40

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation is: V+S MANAGE MENT, /NC
SECOND:	The date dissolution was authorized: 8-31-01
THIRD:	EFFECTIVE DATE TO BE 11-2-01. Adoption of Dissolution (CHECK ONE)
was	solution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval. solution was approved by vote of the shareholders through voting groups.
	The following statement must be separately provided for each voting group ntitled to vote separately on the plan to dissolve:
The	number of votes cast for dissolution was sufficient for approval by
<u> </u>	(voting group)
Siş	ened this 17 day of SEPTEMBER, 2001.
Signature _	(By the Chairman of Vice Chairman of the Board, President, or other officer)
	MISHA VICKERS (Typed or printed name)
	PRESIDENT