19900003/700

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
Certified Copies Certificates of Status
· ——
Special Instructions to Filing Officer:

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M/W that

SECRETARY OF STATE AS DIVISION OF CORPORATIONS

COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: Palms of Paradise Inc		
DOCUMENT NUMBER: P990	00031700	
The enclosed Articles of Dissolution and fee	are submitted for filing.	
Please return all correspondence concerning the	nis matter to the following:	
Earl Farris		
(Name of Co	ntact Person)	
(Firm/C	Sompany)	
2735 Brandy Buck Trail	·	
(Addı	ress)	
Jacksonville, FL 32223		
(City/State a	and Zip Code)	
For further information concerning this matter, please call:		
Earl Farris	at (904 ₎ 268-0277	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
Certificate of Status	\$43.75 Filing Fee & \$\sum \$52.50 Filing Fee, Certified Copy Additional copy is enclosed) \$\$\$ Certificate of Status & 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

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLES OF DISSOLUTION

09 FEB 24 PMII: 08

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:
	Palms Of Paradise, Inc.
SECOND:	The document number of the corporation (if known):
THIRD:	The file date of the articles of incorporation: 03311999
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	nature Eaul Jarris (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.)
	Earl Farris
	(Typed or printed name of person signing)
	President (Title of Person Signing)
	(Title of rerson Signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown distance 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: Palms of Paradise 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:
description and amt of debt, date debt accrued and by whom
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Palms of Paradise Inc
2735 Brandy Buck Trail
Jacksonville, FI 32223
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.
Earl Farris 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