## P9900058871

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
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SECRETARY OF STATE

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## **COVER LETTER**

TO: Amendment Section Division of Corporations	·	
	•	
SUBJECT: DISSOLYTION		
DOCUMENT NUMBER:		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this ma	atter to the following:	
STACEY LANDAU MC	CRARY	
(Name of Contact Person)		
STACEY LANDAU MCCRARY FNC. (Firm/Company)		
(Firm/Company)		
7026 BRYNSWICK CIRCLE (Address)		
(Address)		
BAYWITHAN RAACH EL. 33427		
BOYNTON BEACH, FL. 33437 (City/State and Zip Code)		
For further information concerning this matter, please call:		
STACEY LANDAY MCCRANY at (561) 312-7132  (Name of Contact Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\sum \$43.75 Filing Fee & \$\sum \$43.75 \text{Certificate of Status}\$\$ Certificate of Status	Filing Fee & \$\sum \\$52.50 Filing Fee,  ed Copy Certificate of Status &	
	onal copy is Certified Copy	
enclos	ed) (Additional copy is	
	enclosed)	
MAILING ADDRESS:	STREET ADDRESS:	
Amendment Section Division of Corporations	Amendment Section	
P.O. Box 6327	Division of Corporations	
Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	
	Tallahassee, FL 32301	

## 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:	
	STACEY LANDAY MCCRARY INC.	
SECOND:	The document number of the corporation (if known): P 990000 58871	
THIRD:	The date dissolution was authorized: 12/29/09	
·	Effective date of dissolution <u>if applicable</u> : 12/29/09 (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 of 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  ALCARE  (voting group)  (voting group)	
S	ignature:   (By a director, president by 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)  (Typed or printed name of person signing)	
_	PRESIDENT (Title of person signing)	

Filing Fee: \$35