## P99000087172

| (Re                                     | equestor's Name)   |             |
|---|--------------------|-------------|
| (Ad                                     | dress)             |             |
| (Ad                                     | dress)             | ·           |
| (Cit                                    | ty/State/Zip/Phone | e #)        |
| PICK-UP                                 | ☐ WAIT             | MAIL        |
| . (Bu                                   | siness Entity Nan  | ne)         |
| (Do                                     | ocument Number)    |             |
| Certified Copies                        | _ Certificates     | s of Status |
| Special Instructions to Filing Officer: |                    |             |
|   |                    |             |
|   |                    |             |
|   |                    |             |
|   | ···                |             |

Office Use Only



diss

04/13/15--01024--014 \*\*35.00



114/15

## **COVER LETTER**

| TO: Amendment Section Division of Corporations          |   |  |
|---|---|--|
| SUBJECT: Dissolution of DE                              | NISE BATES ENOS INC                           |  |
| DOCUMENT NUMBER:  | 172   |  |
| The enclosed Articles of Dissolution and fee are subm   | nitted for filing.                            |  |
| Please return all correspondence concerning this matter | r to the following:                           |  |
| JEHF ENOS<br>(Name of Contact Per                       |   |  |
|   |   |  |
| JEFF ENOS + ASSOC. INC.                                 |   |  |
| (Firm/Company   |   |  |
| PO BOX 25   | 64  |  |
| (Address)   |   |  |
| 1.1. ind==nosic=1                                       | =1 34786                                      |  |
| WINDETMETE, I<br>(City/State and Zip (                  | Code)   |  |
| For further information concerning this matter, please  |   |  |
| JEFF ENOS at (  | (Area Code & Daytime Telephone Number)        |  |
| (Name of Contact Person)                                | (Area Code & Daytime Telephone Number)        |  |
| Enclosed is a check for the following amount:           |   |  |
| Certificate of Status Certified                         | nal copy is Certified Copy                    |  |
| MAILING ADDRESS:  | STREET ADDRESS:                               |  |
| Amendment Section                                       | Amendment Section                             |  |
| Division of Corporations P.O. Box 6327                  | Division of Corporations                      |  |
| Tallahassee, FL 32314                                   | Clifton Building 2661 Executive Center Circle |  |

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

| Pursuant to of dissolution | section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles on:  |  |  |  |
|----------------------------|---|--|--|--|
| FIRST:                     | The name of the corporation as currently filed with the Florida Department of State:  DENISE BATES ENOS INC.  |  |  |  |
| SECOND:                    | The document number of the corporation (if known): \$\mathbb{P}99000087177  |  |  |  |
| THIRD:                     | The date dissolution was authorized: 12/31/14   |  |  |  |
|                            | Effective date of dissolution <u>if applicable</u> : (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  (By a director, president or other officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by |  |  |  |
|                            | (Typed or printed name of person signing)   |  |  |  |
|                            | Poesident   |  |  |  |
|                            | (Title of person signing)   |  |  |  |

Filing Fee: \$35