531582

· (Reque	estor's Name)	
(Addre	ss)	
(Addre	ee)	
(ladic	33)	
(City/S	tate/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Busine	ess Entity Nar	ne)
(Docur	ment Number)	
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Certified Copies	Certificates	of Status
		
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SECRETARY OF STAIR ALLAHASSEE, FLORID



COVER LETTER

TO: Amendment Section	
Division of Corporations	
SUBJECT: DISSOLUTION OF	CORPORATION
DOCUMENT NUMBER: 53158	2
The enclosed Articles of Dissolution and fee are s	ubmitted for filing.
Please return all correspondence concerning this m	atter to the following:
MARGARET P. R.	06-ER-5
(Name of Contact	Person)
Dux Discounthia	pars + DeCoy Lounge, INC
289 PERSIMME	IN ROAD
(Address)	22358
(City/State and Z	Sip Code)
For further information concerning this matter, plea	ase call:
MARGARETHOGERS at	(850) 962-6152
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certi (Addi	75 Filing Fee & \$\Bigcup \\$52.50 Filing Fee, fied Copy
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

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• ,	ARTICLES OF DISSOLUTION	
Pursuant to of dissolution	section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles on:	Ø
FIRST:	The name of the corporation as currently filed with the Florida Department of State E. F. S.	
	DUX DISCOUNT LIQUORS + DECOY LOUNGE, INCOA	
SECOND:	The document number of the corporation (if known): 5.3/582	
THIRD:	The date dissolution was authorized: MAY 30, 2006	
	Effective date of dissolution if applicable: (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)	
S	Gignature: (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)	
-	MARGARET P. ROGERS (Typed or printed name of person signing)	
-	PRESIDEN + (Title of person signing)	
	() may or barrack subminity	

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. 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: Claim OrigiNATED AND SIGNED & Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 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.

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