

S65874

Requestor's Name

Moayad

P.O. Box 13914

Tallahassee, FL 32317

Office Use Only

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

500002530175-0

-05/20/98-01057-016
*****35.00 *****35.00

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☐ Walk in

☐ Pick up time _____

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input checked="" type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
98 JUL - 1 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Examiner's Initials

[Signature] 7/1



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

RECEIVED
98 JUL -1 AM 11:20

May 29, 1998

MOAYAD
P.O. BOX 13916
TALLAHASSEE, FL 32317

SUBJECT: CAMELLIA SQUARE, INC.
Ref. Number: S65874

We have received your document for CAMELLIA SQUARE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the date the dissolution was authorized.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6908.

Teresa Brown
Corporate Specialist

Letter Number: 698A00030289

MAIL TO
PO BOX 13914
Tall, FL 32317

ARTICLES OF DISSOLUTION

FILED
98 JUL -1 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

FIRST: The name of the corporation is: CAMELLIA SQUARE, INC.

SECOND: The date dissolution was authorized: ~~IMMEDIATELY~~ May 15, 98

THIRD: 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 vote 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

(voting group)

Signed this 15th day of May, 1998

Signature _____

(By the Chairman or Vice Chairman of the Board, President, or other officer)

ALLEN R. MOAYAD

(Typed or printed name)

SECRETARY

(Title)