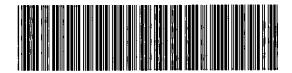
## V16902

| (Requestor's Name)                      |
|---|
|   |
| (Address)                               |
|   |
| (Address)                               |
| (,                                      |
| (City/Chata/Zin/Dhana #0                |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
| Obtaindates of otatus                   |
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| Special Instructions to Filing Officer: |
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Office Use Only



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SCORGIARS P. P. JOHIO.

VIVIII N/Notice 06-20-11

## **COVER LETTER**

**TO:** Amendment Section **Division of Corporations** 

| subject: Pineview Chevrolet, Ir   | ic.   |
|---|---|
| DOCUMENT NUMBER: V16902   |   |
| The enclosed Articles of Dissolution and f  | ee are submitted for filing.  |
| Please return all correspondence concerning   | g this matter to the following:   |
| Frank E. Maloney, Jr.   |   |
| (Name of  | Contact Person)   |
| Frank E. Maloney, Jr., P.A.   |   |
|   | m/Company)  |
| 445 East Macclenny Avenue   |   |
|   | ddress)   |
| Macclenny, FL 32063   |   |
| (City/Sta   | te and Zip Code)  |
| For further information concerning this ma  | tter, please call:  |
| Frank E. Maloney, Jr.   | at ( 904 ) 259-3155   |
| (Name of Contact Person)  | (Area Code & Daytime Telephone Number)  |
| Enclosed is a check for the following amou  | int:  |
| \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status                                      | ☐\$43.75 Filing Fee & ✓\$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

## 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:   |  |  |  |
|---------|--|--|--|--|
|         | Pineview Chevrolet, Inc.   |  |  |  |
| SECOND: | The document number of the corporation (if known): V16902  |  |  |  |
| THIRD:  | The date dissolution was authorized: June 15, 2011   |  |  |  |
|         | Effective date of dissolution <u>if applicable</u> : June 15, 2011  (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, presiden of 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) |  |  |  |
|         | Ray Odom   |  |  |  |
|         | (Typed or printed name of person signing)  |  |  |  |
|         | Officer  |  |  |  |
|         | (Title of person signing)  |  |  |  |

Filing Fee: \$35

## **Notice of Corporate Dissolution**

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: Pineview Chevrolet, 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:

Name, address, telephone number of person or company filing claim, reason for claim, itemized statement of claim amount.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Ray Odom
P.O. Box 504

Macclenny, Florida 32063

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.

Ray Odom

Printed Name of the Person Filing

against this corporation as provided in s. 607.1407, F.S.

Senature of the Person Filing

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