V25458

Requestor's Name Elizabeth Stevens 8325 County Road 136 Live Oak, FL 32060-7445 City/State/Zip Phone #		Office Use Only
		Office Use Only
CORPORATION NA	ME(S) & DOCUMENT NUM	BER(S), (if known):
1. (Corpora	tion Name) (Do	current #)
2.	tion Name) (Do	cument #)
	tion Name) (De	outlett ")
3. (Corpora	tion Name) (Do	ocument #)
4(Corpora	tion Name) (Do	ocument #)
□ Walk in □	Pick up time	Certified Copy
	Will wait Photocopy	Certificate of Status
NEW FILINGS	AMENDMENTS	
Profit	Amendment	9000028166782 -03/24/9901049005 ******35.00 ******35.00
NonProfit	Resignation of R.A., Officer/Dire	ctor ************************************
Limited Liability	Change of Registered Agent	
Domestication	Dissolution/Withdrawal	
Other	Merger	
OTHER FILINGS. Annual Report	REGISTRATION/	
Fictitious Name	Foreign	
Name Reservation	Limited Partnership	Voldis
Name Reservation	Reinstatement	
	Trademark	VS MAR 2 9 1999
	Other	
-		Examiner's Initials

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ARTICLES OF DISSOLUTION

99 MAR 25 AM 11:27
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: Country Life Styles, Inc.
SECOND:	The date dissolution was authorized: 12-31-98
THIRD:	Adoption of Dissolution (CHECK ONE)
•	olution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.
☐ Diss	olution was approved by vote of the shareholders through voting groups.
	The following statement must be separately provided for each voting group ntitled to vote separately on the plan to dissolve:
The	number of votes cast for dissolution was sufficient for approval by
	(voting group)
Signe	ed this 19 day of much , 1999.
Signature _	(By the Chairman or Vice Chairman of the Board, President, or other officer)
	Elizabeth Stevens (Typed or printed name)
	President (Title)