173466

(Re	equestor's Name)			
(Address)				
(Ac	ldress)			
(Ci	ty/State/Zip/Phone	⊕ #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only





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03/04/10--01013--001 **35.00





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:				
	Larry Westfall Corporation				
SECOND:	: The document number of the corporation (if known): V73466				
THIRD:	The date dissolution was authorized: 12/31/2009				
	Effective date of dissolution if applicable: 12/31/2009 (no more than 90 days after dissolution	n file date)	- 11		
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	NOTES	2010		
	(voting group)	THE CO	2010 MAR -L PM		
	Signature: Signat	2:29		C	
	Janette Westfall				
	(Typed or printed name of person signing)				
	Officer				
	(Title of person signing)				

Filing Fee: \$35

COVER LETTER

Division of Corporations		
SUBJECT: Dissolution of Corpo	ration	
DOCUMENT NUMBER: V73466		
The enclosed Articles of Dissolution and	d fee are submitted for filin	ng.
Please return all correspondence concern	ning this matter to the follo	wing:
Janette Westfall		
(Name	of Contact Person)	
Larry Westfall Corporation		
(F	Firm/Company)	
6223 Serenity Lane		
	(Address)	·
Macclenny FL 32063		
(City/S	State and Zip Code)	
For further information concerning this r	matter, please call:	
Eml Clayton Lyons	at (904) 2	:59-4307
(Name of Contact Person)		& Daytime Telephone Number)
Enclosed is a check for the following am	nount:	
✓\$35 Filing Fee ☐\$43.75 Filing Fee of Certificate of Status		\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Am Div Clif	EET ADDRESS: endment Section ision of Corporations ton Building 1 Executive Center Circle

Tallahassee, FL 32301