

N13000006937

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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FILED  
14 MAY -6 PM 2:04  
TALLAHASSEE, FLORIDA

VDW/MW

MAY 16 2014

R. WHITE

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dissolution Papers

**DOCUMENT NUMBER:** 111300000 6937

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Karel Fernandez  
(Name of Contact Person)

Castle Crops Corp.  
(Firm/Company)

2303 W Ohio Ave  
(Address)

Tampa FL 33607  
(City/State and Zip Code)

For further information concerning this matter, please call:

Karel Fernandez at ( 813 ) 732-2205  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☐ \$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

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

Pursuant to section 617.1401, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

Castle Crops Corp.

SECOND: The document number of the corporation (if known): N13000006937

THIRD: The file date of the articles of incorporation: 8/5/2013

FOURTH: The corporation has not commenced to conduct its affairs.

FIFTH: No debts of the corporation remains unpaid.

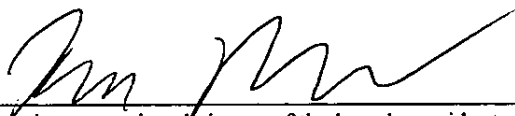
SIXTH: Adoption of Dissolution **(CHECK ONE)**

(Note: Cannot be authorized by an incorporator if the corporation has directors)

☒ The dissolution was authorized by a majority of the directors:  
OR

☐ The dissolution was authorized by an incorporator.

☐ The dissolution was authorized by a majority of the incorporators.

Signature: 

(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

Karel Fernandez

(Typed or printed name of person signing)

President, Castle Crops Corp.

(Title of person signing)

Filing Fee: \$35

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## 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. 617.1407, F.S.*

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

Name of Corporation: Castle Crops Corp.

*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:*

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

Karel Fernandez  
2303 W Ohio Ave  
Tampa FL, 33607

*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.*

Karel Fernandez  
Printed Name of the Person Filing

  
Signature of the Person Filing

May 1, 2014