

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : STEARNS WEAVER MILLER WEISSLER ALMADEFF & SITTERSON

Account Number : I20060000135 Phone : (305)789-3200

Fax Number : (305)789-4137

DISSOLUTION OR WITHDRAWAL SERVICE AMERICA ENTERPRISE, INC.

Certificate of Status	0
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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: SERVICE AMERICA ENTERPRISE, INC.						
SECOND:	The document number of the corporation (if known):						
THIRD:	The date dissolution was authorized:						
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.						
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						Jáłł 2	
					V S S E I	l AH	
	Signature:	- DocuSigned by:			STATE E. FL	2021 Jáh 21 - AM 11: 4 6	Can.
	(By a director, presi	dent or other officer -	if directors or office ver, trustee, or other	ers have not been selecter court appointed fiducian	d, by y, by		
	Charles E. Chase						
	(Тур	ed or printed name of	person signing)	· · · · · · · · · · · · · · · · · · ·			
	Director and Secretary						
		(Title of person sign	ing)		-		—

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. 607.1407, F.S.

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

Name of Corporation: Service America Enterprise, Inc.	
The above named corporation is the subject of dissolution and t	the effective date of a dissolution is:
(date filed with the Dept. if date specif	fied in the Articles of Dissolution)
Description of information that must be included in a claim:	
a. Name of Claimant;	
b. Mailing address and other contact information of Claimant;	
c. Description and basis for the claim;	
d. All supporting documentation for the claim; and	
e. Description of the relief requested and, if such relief is monetary, t	then the amount of the relief requested.
Mailing address where written claims can be sent: (Claims can Jeremy Rakusin, CFO, 1255 Bay Street, Suite 600, Toronto, ON M5.	
A claim against the above named corporation will be barred unl within 4 years after the filing of this notice. Charles E. Chase	ess a proceeding to enforce the claim is commenced Docustined by:
Printed Name of the Person Filing	Signature of the Person Fitting

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