

PO3 0001 40276

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

(Document Number)

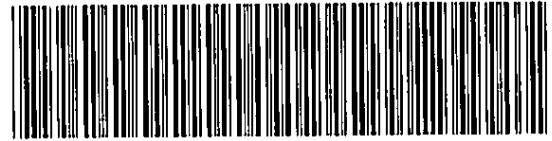
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J. HORNE
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CLERK OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 13, 2023

JUSTYNA KIEREZ
3732 MEADOW RUE LANE
NORCROSS, GA 30092 US

SUBJECT: W.O. HOME IMPROVEMENT, INC.
Ref. Number: P03000140276

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

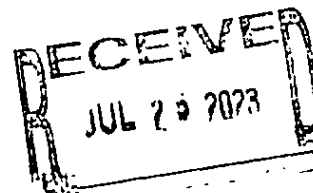
PLEASE COMPLETE THE CORRECT ATTACHED FORM.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Jasmine N Horne
Regulatory Specialist II

Letter Number: 923A00015528



Justyna Kierez
21 Butternut Drive
Palm Coast, FL 32137
(646) 641-3907

March 22, 2023

To whom it may concern:

Please accept this letter as a request to dissolve the business of W.O. Home Improvement Inc. P03000140276. The self-employed owner of this business has passed away on January 2, 2023. I request the business to be dissolved effective immediately. Check # 205 in the amount of \$35.00 is enclosed and is made payable to the Florida Department of State.

Sincerely,

A handwritten signature in black ink, appearing to read 'Justyna Kierez', with a large, stylized flourish at the end.

Justyna Kierez
Daughter of decedent

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Request of Dissolution

DOCUMENT NUMBER: P03000140276

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

Please return all correspondence concerning this matter to the following:

Barbara Ozimek
(Name of Contact Person)

W.O. Home Improvement, Inc.
(Firm/Company)

21 Butternut Drive
(Address)

Palm Coast, FL 32137
(City/State and Zip Code)

For further information concerning this matter, please call:

Justyna Kierez at (407) 641 3907
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: * check already on file and cashed

- ☐ \$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)

check
#205
on 4/13/02

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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TALLAHASSEE, FLORIDA

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:

W.O. Home Improvement, Inc.

SECOND: The document number of the corporation (if known): P03000140276

THIRD: The date dissolution was authorized: 07/19/2023

Effective date of dissolution if applicable: 07/19/2023

(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.

FOURTH: Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.

Signature: _____

(By a director, president or 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)

Justyna Kierez

(Typed or printed name of person signing)

Daughter

(Title of person signing)

Filing Fee: \$35