

190488

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

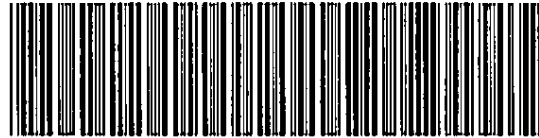
(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 AUG -6 PM 3:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SEP 01 2021

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 21, 2021

HERBERT L. HOCHBERG
112 CARTHAGE ROAD
SCARSPALE, NY 10583

SUBJECT: HICKORY POINT GROVES, INC.
Ref. Number: 190488

Upon receipt of your letter and/or check(s) totaling \$43.75, no document was found. Please send your document with any fees due to:

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Darlene Connell
Regulatory Specialist II Supervisor

Letter Number: 521A00016976

RECEIVED
28 AUG -
PM 2:26

Herbert L. Hochberg
112 Carthage Road
Scarsdale, NY 10583
914 723-6566
h_hochberg@hotmail.com

May 5, 2021

Florida Department of State
Amendment Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Dissolution of Hickory Point Groves, Inc.

Dear DOC:

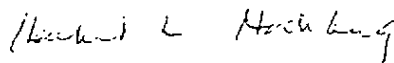
This letter is to request the Dissolution of Hickory Point Groves, Inc. The Cover Letter and check for \$43.75 are enclosed.

The Federal Employer Identification Number is 59-6062634.

The Corporation will have no operations, assets or liabilities as of May 31, 2021.

Please send me the Dissolution documents including the Certificate of Status.

Yours truly,



President
Hickory Point Groves, Inc.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION OF HICKORY POINT GROVES, INC.

DOCUMENT NUMBER: 190488

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

Please return all correspondence concerning this matter to the following:

HERBERT L. HECHBERG

(Name of Contact Person)

HICKORY POINT GROVES, INC.

(Firm/Company)

112 CARTHAGE ROAD

(Address)

SCARSDALE, NY 10583

(City/State and Zip Code)

For further information concerning this matter, please call:

HERBERT L. HECHBERG

(Name of Contact Person)

at (

914 723 - 6566

(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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:

HICKORY POINT GROVES, INC.

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

190488

THIRD: The date dissolution was authorized:

MAY 5, 2021

Effective date of dissolution if applicable:

MAY 31, 2021

(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.

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2021 AUG -6 PM 3:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signature:

Herbert L. Hochberg

(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)

HERBERT L. HOCHBERG

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35