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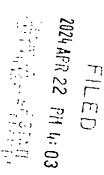
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special mandenons to 1 ming officer.
J. HORNE
o. HORNE
MAY - 7 2024

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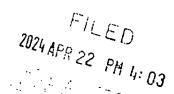
COVER LETTER

TO: Amendment Section **Division of Corporations**

SUBJECT: Dissolution of Northside Plaza, INC	<u>c</u>
DOCUMENT NUMBER: 380371	
The enclosed Articles of Dissolution and	fee are submitted for filing.
Please return all correspondence concernir	ng this matter to the following:
Kimberly Straubinger	
(Name of	Contact Person)
Northside Plaza, INC	
(Fir	m/Company)
2215 Shirley Ann Court	
(A	Address)
Tallahassee, Fl 32308	
(City/Sta	ate and Zip Code)
For further information concerning this ma	atter, please call:
Kimberty Straubinger	at ((850) 591-1510
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amou	unt:
■ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed) □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address:	Street Address:

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

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



ARTICLES OF DISSOLUTION

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution: of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State: Northside Plaza, INC
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized: 03/18/2024
	Effective date of dissolution if applicable: 04/30/2024
	(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: Kumberly Straubings (By a director, provident or other officer - if directors or officers have not been selected, by
	an incorporator - it in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	Kimberly Straubinger
	(Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35