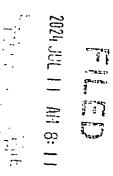
# 

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only





CSC - Tallahassee
CSC 1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext:

To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext:

Date: 07/11/24 Order #: 1553209-1

Re: APL Logistics Freight Systems, Inc.

Processing Method: Routine

#### TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Dissolution/Cancellation/Termination

Amount to be deducted from our State Account: \$35.00 - FL State Account Number:

12000000195

Please take the following action: File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Mailing Address:

P.O. Box 6327

Amendment Section

Division of Corporations

Tallahassee, FL 32314

Dissolution of APL Logistics Freight Systems, Inc.  SUBJECT:
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jennifer Young Donnelly
(Name of Contact Person)
APL Logistics Americas, Ltd.
(Firm/Company)
14350 North 87th Street, Suite 350
(Address)
Scottsdale, Arizona 85260
(City/State and Zip Code)
For further information concerning this matter, please call:
602-571-4482 at (
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
■ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee,  Certificate of Status Certified Copy (Additional copy is enclosed)  S43.75 Filing Fee & □ \$52.50 Filing Fee,  Certificate of Status & Certified Copy (Additional copy is enclosed)

Street Address:

Amendment Section

**Division of Corporations** 

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

# ARTICLES OF DISSOLUTION



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

FIRST:	The name of the corporation as currently filed with the Florida Department of State: APL Logistics Freight Systems, Inc.
SECOND:	The document number of the corporation (if known): 480433
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.
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)
	Fabio Duque Barros
	(Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35

### **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: APL Logistics Freight Systems, Inc. The above named corporation is the subject of dissolution and the effective date of a dissolution is: (date filed with the Dept, if date specified in the Articles of Dissolution) Description of information that must be included in a claim: In all claims, claimants must state the amount of their claim, state the nature of the claim, provide the name and address of the claimant, and all claims must be signed. Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations) 14350 North 87th Street, Suite 350 Scottsdale, Arizona 85260 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. Fabio Duque Barros

Printed Name of the Person Filing