

582 414

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

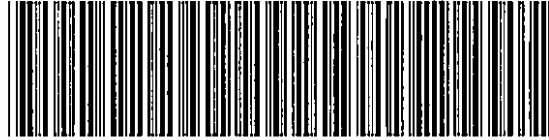
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200335127482

10/11/19--01015--012 **35.00

2019 OCT 11 AM 8:51
FALLS CHURCH, VA
FALLS CHURCH, VA

OCT 31 2019
C Kinsey

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TRIAD COMMUNICATIONS, INC. Dissolution _____

DOCUMENT NUMBER: 582414 _____

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

Please return all correspondence concerning this matter to the following:

Lorna Rubin

(Name of Contact Person)

TRIAD COMMUNICATIONS, INC.

(Firm/Company)

1122 NW 20TH DRIVE

(Address)

GAINESVILLE, FL 32605

(City/State and Zip Code)

For further information concerning this matter, please call:

Lorna Rubin

352-376-0492

(Name of Contact Person)

at (_____
(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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:

TRIAD COMMUNICATIONS, INC.

SECOND: The document number of the corporation (if known): 582414

THIRD: The date dissolution was authorized: 10/1/19

Effective date of dissolution if applicable: 12/31/19

(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: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

Signature:

Lorna Rubin

(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)

Lorna Rubin

(Typed or printed name of person signing)

President

(Title of person signing)

2019 OCT 11 AM 8:51
FILED
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF DADE
FLORIDA