586787

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: FOXHEAD HOLDINGS INC.
DOCUMENT NUMBER: # 586787
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
BRIAN J. LADELL (Name of Contact Person)
(Name of Contact Person)
(Firm/Company)
24 SUMMIT LANE (Address)
(Address)
SAFETY HARBOR FL. 34695 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
RLIAN J. LADELL at (727) 430 - 6956 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\times \times \
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

Tallahassee, FL 32314

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:
	FOXHEAD HOLDINGS INC
SECOND:	The document number of the corporation (if known): # 586787
THIRD:	The date dissolution was authorized: November 12, 2024
	Effective date of dissolution if applicable: November 12 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: (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)
	BRIAN J. LADELL
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

Filing Fee: \$35