# 60151009

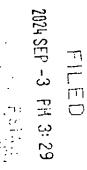
(Requestor's Name)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
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### **COVER LETTER**

**Division of Corporations** SUBJECT: FIELDS APPLIANCE SERVICE, INC. **DOCUMENT NUMBER: 615609** The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: TROY B. FIELDS (Name of Contact Person) FIELDS APPLIANCE SERVICE, INC. (Firm/Company) 2440 PICKFORD CIRCLE (Address) APOPKA, FL 32703 (City/State and Zip Code) For further information concerning this matter, please call: TROY B. FIELDS (Area Code) (Daytime Telephone Number) (Name of Contact Person) 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 Certificate of Status Certified Copy (Additional copy is (Additional copy is enclosed) enclosed)

## Mailing Address:

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

TO: Amendment Section

### 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:  FIELDS APPLIANCE SERVICE, INC.		
SECOND:	The document number of the corporation (if known): 615609		
THIRD:	The date dissolution was authorized: 05/05/2023		
	Effective date of dissolution if applicable: 05/05/2023	6 (C	
	(no more than 90 days after a Note: If the date inserted in this block does not meet the applicable statutory filing not be listed as the document's effective date on the Department of State's records.	requirements, this date will	
FOURTH:	Dissolution was approved by the shareholders, in the manner required the articles of incorporation.	d by this chapter and	
	Signature: Trong B Fully		
	(By a director, president or other officer - if directors or officers have not been sele an incorporator - if in the hands of a receiver, trustee, or other court appointed fidu that fiduciary)	ected, by eciary, by	
	TROY B. FIELDS		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)		

Filing Fee: \$35