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| Special Instructions to | Filing Officer: | | | |
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Office Use Only



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C. CARROTHURS

COVER LETTER

| TO: Amendment Section Division of Corporations | | | | |
|--|---|--|--|--|
| SUBJECT: Dissolution | of Corporation | | | |
| DOCUMENT NUMBER: F06 | 00000 1938 | | | |
| The enclosed Articles of Dissolution and fee are submitted for filing. | | | | |
| Please return all correspondence concerning | this matter to the following: | | | |
| Lorraine Gualtie | ontact Person) | | | |
| (Name of Co | ontact Person) | | | |
| Jaybird & Partner | rs, Inc. | | | |
| (Firm/ | (Company) | | | |
| 6201 Evergreen 1 | Ave | | | |
| | | | | |
| Seminole FL 3 | 33772 | | | |
| (City/State | and Zip Code) | | | |
| For further information concerning this matter | er, please call: | | | |
| LAMUNE GUALTERI (Name of Contact Person) | at (727 873 - 6491 (Area Code) (Daytime Telephone Number | | | |
| Enclosed is a check for the following amount | t: | | | |
| \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status | \$43.75 Filing Fee & \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) | | | |
| MAILING ADDRESS: | STREET ADDRESS: | | | |
| Amendment Section | Amendment Section | | | |
| Division of Corporations P.O. Box 6327 | Division of Corporations Clifton Building | | | |
| Tallahassee, FL 32314 | 2661 Executive Center Circle | | | |

Tallahassee, FL 32301

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

| Jaylivi: Kouthers Inc (Name of Corporation) | - | _ | |
|--|---------------|--------------------------------------|------|
| (Name of Corporation) | | | |
| Fa/ 60-0-1028 | | | |
| (Document Number of Corporation (if known) | | - | |
| | | | |
| (Incorporated Under Laws of) | | - | |
| (Incorporated Under Laws of) | | | |
| | | 170.73 1 # 10 100.00 100.00 | |
| This corporation is no longer transacting business or conducting affairs within the State o | f Florida a | nd/here | by |
| voluntarily surrenders its authority to transact business or conduct affairs in Florida. | - " : | 170 | : |
| This corporation revokes the authority of its registered agent in Florida to accept service | ce on its h | ehalf a | ınd: |
| appoints the Department of State as its agent for service of process based on a cause of a | | | |
| the time it was authorized to transact business or conduct affairs in Florida. | | ••• | |
| The fallering in a second will be discovered by | per, | 450 | |
| The following is a current mailing address for the corporation: | | | |
| 6201 Evergreen Ave | | | |
| (Mailing Address) | | • | |
| | | | |
| Seminale FL 33772. | | | |
| (City/ State /Zip) | | • | |
| | | | |
| The corporation agrees to notify the Department of State in the future of any change in its r | nailina ade | drecc | |
| The corporation agrees to notify the Department of State in the future of any change in its i | naming add | μcss. | |
| Long Dance Herman | | | |
| Signature: 1 State Court (te) | | | |
| (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 inductary) | | | |
| | n signing) | | |
| LONGHINK GUALITEIC | r signing) | | |
| (Typed or printed name of person signing) | | | |
| 1/11 Process | | | |
| (Title of person signing) | | | |