F97991

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COVER LETTER

TO: Amendment Section " Division of Corporations . "
subject: Dissolution
DOCUMENT NUMBER: F97991
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Slenda F. Swearingen (Name of Contact Person)
Law Offices of Glendaf Sweavingen P.A. (Firm/Company)
PO BOX 1009
(Address)
Marianna Fl. 32446
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at ((850) 557-1250 (Area Code) (Daytime Telephone Number
Enclosed is a check for the following amount:
☐ \$43.75 Filing Fee
Mailing Address: Amendment Section Street Address: Amendment Section

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

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:
	Law Offices of GlandaFSwearingen P.A.
SECOND:	The document number of the corporation (if known): F97991
THIRD:	The date dissolution was authorized: 12-31-19
	Effective date of dissolution if applicable: 12-3 -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:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.
	W 1 7 C
S -	Signature: March 7 Sugarinary =
	(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 tiduciary, by that fiduciary)
	(Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35