## H 17508

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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT:		
DOCUMENT NUMBER:H17.	508	
The enclosed Articles of Dissolution and for	ee are submitted for filing	<u>.</u>
Please return all correspondence concerning	g this matter to the follow	ring:
SUSAU ST	RADER	
(Name of	Contact Person)	
(Firm	n/Company)	
904 C	CECHID AVE	
(Ac	ddress)	
Immo	KALEE, FL 34	142
(City/Sta	te and Zip Code)	
For further information concerning this mat	tter, please call:	
(Name of Contact Person)	at ( (Area Code)	(Daytime Telephone Number)
		(,,
Enclosed is a check for the following amou	nt:	
☑ \$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	Amer Divis The C	t Address: Independent Section It is a section of Corporations Centre of Tallahassee 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:		
	R.D. STRADER IN Curporated		
SECOND:	The document number of the corporation (if known): H17508		
ΓHIRD:	The date dissolution was authorized: $\frac{12/31/19}{}$		
	Effective date of dissolution if applicable:  (no more than 90 days after dissolution to the 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 the articles of incorporation.	chapter and	
		2020 AUG 21 PH 6: 09	
	Signature:Away Officely	PH 6: 09	
`	(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)		
	SUSAU STRADER_ (Typed or printed name of person signing)	<del></del>	
	$\frac{D / S / V P}{\text{(Title of person signing)}}$		
	(Title of person signing)		

Filing Fee: \$35