01/04/2024 THU 10/42 PAX 1/4/24, 12:20 PM Display of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000005398 3)))



H240000053983ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : TRIPP SCOTT, P.A.
Account Number : 075350000065
Phone : (954)525-7500
Fax Number : (954)761-8475

DISSOLUTION OR WITHDRAWAL THE CAROLINA GROUP, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

124 J. PP

رزن

Electronic Filing Menu

Corporate Filing Menu

Hel

PRETARY OF STATE

: E E D

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: THE CAROLINA GROUP, INC.	
SECOND:	The document number of the corporation (if known):	
THIRD:	The date dissolution was authorized:	
	Effective date of dissolution if applicable; 12/31/2023	
	(no more than 90 days after dissolution file date) Note: If the date inserted in this blook 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 off fer - 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) SAMUEL ROBBIN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Name of Corporation: ____ THE CAROLINA GROUP, INC. The above named corporation is the subject of dissolution and the effective date of a dissolution is: 12/31/23 (date filed with the Dept. if date specified in the Articles of Dissolution) Description of information that must be included in a claim: Name of Claimant, Date of Incident, Details of Claim Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations) Tripp Scott, P.A.; Attn: Marianna S. DeJager, Esq. 110 SE 6th Street, Fifteenth Floor Fort Lauderdale, FL 33301 A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice. SAMUEL ROBBIN

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00

Printed Name of the Person Filing