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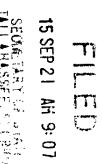
(Requ	estor's Name)	
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PICK-UP	MAIT	MAIL
(Rusir	ness Entity Na	me)
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Certified Copies	Certificate	s of Status
Special Instructions to Fil	ing Officer:	
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disso w/matrice SEP 2 4 2015

D CUSHING

COVER LETTER

* TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

SUBJECT: Corpo	rate Dissolution for Wallenbi	rock Supply, Inc.			
DOCUMENT NU	MBER:	····			
The enclosed Artic	cles of Dissolution and	fee are submitted for filin	g.		
Please return all co	orrespondence concernin	g this matter to the follow	ving:		
Gleyn Wallenbrock					
	(Name of	Contact Person)			
Wallenbrock Supply,	Inc.				
	(Fir	m/Company)			
1624 Pine Valley Driv	ve - Unit 114			15 SE	
	(A	(ddress)		2	Acceptance and applica-
Fort Myers, FL 3390	7		हुँका जिल्हें जीवा करों जीवा कर के		I
	(City/Sta	ate and Zip Code)		_ 5	C
For further informa	ation concerning this ma	tter, please call:	# 1 #4 #	9:07	
Gleyn Wallenbrock		at (at)			
(Name o	of Contact Person)	(Area Code)	(Daytime Telephone	Numb	er)
Enclosed is a checl	k for the following amou	ant:	/		
□ \$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 Statu Certified Copy (Additional copy is enclosed)	ıs &	
MAILING Amendmen Division of P.O. Box 6	t Section Corporations	Amer Divis	CET ADDRESS: Indiment Section It is in the control of Corporations on Building		

2661 Executive Center Circle

Tallahassee, FL 32301

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: Wallenbrock Supply, Inc.					
SECOND:	The document number of the corporation (if known):					
THIRD:	The date dissolution was authorized: 12/31/14					
	Effective date of dissolution if applicable: (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:	Adoption of Dissolution (CHECK ONE)					
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.					
	☐ Dissolution was approved by the shareholders through voting groups. ☐ ☐					
	The following statement must be separately provided for each voting group entitle to vote separately on the plan to dissolve:					
	The number of votes cast for dissolution was sufficient for approval by					
	(voting group)					
•	Signature: Slyn F. Wallenbar (By a director, president or other officer - if directors or officers have not been selected, by					
.	(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)					
	Gleyn Wallenbrock					
•	(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.

Name of Corporation: Wallenbrock Supply, Inc. Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Wallenbrock Supply, Inc. 1624 Pine Valley Drive - Unit 114 Fort Myers, FL 33907 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. Gleyn Wallenbrock Mallenbrock Mallenbrock	This "Notice of Corporate Dissolution" is optional and is not requi	ired when filing a voluntary dissoluti	on.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Wallenbrock Supply, Inc. 1624 Pine Valley Drive - Unit 114 Fort Myers, FL 33907 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. Gleyn Wallenbrock May F. Wallendade May F. Wallendade Cleyn Wallenbrock	Name of Corporation: Wallenbrock Supply, Inc.		
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Gleyn Wallenbrock Meyn F. Wallendorfe	Fort Myers, FL 33907		
		a proceeding to enforce the claim is	commenced
Printed Name of the Person Filing Signature of the Person Filing	Gleyn Wallenbrock Printed Name of the Person Filing	Signature of the Person Filing	>

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