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COVER LETTER

TO: Amendment Section Division of Corporations SUBJECT: _ Articles of Dissolution N06000002927 DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Robert Stobaugh (Name of Contact Person) (Firm/Company) 34328 Perfect Dr (Address) Dade City, FL 33525 (City/State and Zip Code) For further information concerning this matter, please call: Robert Stobaugh (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: ■ \$35 Filing Fee \$\square\$ \$43.75 Filing Fee & \$\square\$ \$\$43.75 Filing Fee & \$\square\$ \$\$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **Mailing Address:** 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

of dissolutio	The name of the corporation as currently filed with the Florida Department of State:
	Anglo German Historical Trust, Inc.
SECOND:	The document number of the corporation (if known): N06000002927
THIRD:	The date dissolution was authorized:
	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:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.
S	ignature: Robert Stobayok
	(By a director, president or other filter - 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)
	Robert Stobaugh

Filing Fee: \$35

(Typed or printed name of person signing)

(Title of person signing)

Director