## 1110000011314

(Requestor's Name)		
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(Cit	ty/State/Zip/Phone #	7)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Name	)
(Do	cument Number)	
Certified Copies	Certificates of	f Status
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
BIVISION OF CORPORATIONS

AND 35 10 \$19/11

## **COVER LETTER**

TO: Amendment Section

Division of Corporations	
SUBJECT: Dissolution of NPO Dole	e Corp
DOCUMENT NUMBER: N10000011	314
The enclosed Articles of Dissolution and fee	are submitted for filing.
Please return all correspondence concerning t	his matter to the following:
Ricardo Abend	. •
(Name of	Contact Person)
ti	
109 Rockwell Church Rd NE	/Company)
problem to a the problem of the same of	ddress) प्रमृति एक पुरि एक अधिक प्रमिक्षिक तक एक प्रमृत्य
Winder, GA 30680	
(City/State	A STATE OF A CONTRACTOR AND A STATE OF A STA
Ricardo Abend	at ( 678 ), 8952588
(Name of Contact Person)	at ( 678 ). 8952588 (Area Code & DaytimeTelephone Number)
Enclosed is a check for the following amount:	
✓ \$35 Filing Fee	S43.75 Filing Fee & S52.50 Filing Fee. Certified Copy (Additional copy is enclosed)  S52.50 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	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

Pursuant to section 617.1401, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:	
	Dole Corp	
SECOND:	The document number of the corporation (if known): N10000011314	
THIRD:	The file date of the articles of incorporation: 12/07/2019	
FOURTH **	The corporation has not commenced to conduct its affairs.	
FIFTH:	No debts of the corporation remains unpaid.	
SIXTH:	Adoption of Dissolution (CHECK ONE) (Note: Cannot be authorized by an incorporator if the corporation has directors)	
	The dissolution was authorized by a majority of the directors: OR	<u> </u>
	☐ The dissolution was authorized by an incorporator.	VISION
	☐ The dissolution was authorized by an incorporator. ☐ The dissolution was authorized by a majority of the incorporators.	SECRETARY CORPORATION OF CORPORATION
Signa		٠
	Ricardo Abend	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	

Filing Fee: \$35