

N14000003837

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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MAY 07 2015  
R. WHITE

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15 MAY -1 PM 1:57  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** NON PROFIT ARTICLES OF DISSOLUTION  
(HAS NOT COMMENCED TO CONDUCT ITS AFFAIRS)

**DOCUMENT NUMBER:** N14000003837

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

STEPHEN E. VALDES JR

(Name of Contact Person)

WEDIBLES FLORIDA, INC.

(Firm/Company)

7708 STATE ROAD 52

(Address)

HUDSON, FL 34667

(City/State and Zip Code)

For further information concerning this matter, please call:

STEPHEN E VALDES, JR

(Name of Contact Person)

at ( 727 ) 798-7027

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>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

FILED

15 MAY -1 PM 1:57

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

FIRST: The name of the corporation as currently filed with the Florida Department of State:

MEDIBLES FLORIDA, INC

SECOND: The document number of the corporation (if known): N14000003837

THIRD: The file date of the articles of incorporation: 4/17/2014

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

☐ The dissolution was authorized by an incorporator.

☐ The dissolution was authorized by a majority of the incorporators.

Signature: [Signature]  
(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

STEPHEN E VALDES JR

(Typed or printed name of person signing)

VICE PRESIDENT (REGISTERED AGENT)

(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. 617.1407, F.S.

This "**Notice of Corporate Dissolution**" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: MEDIBLES FLORIDA, 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:

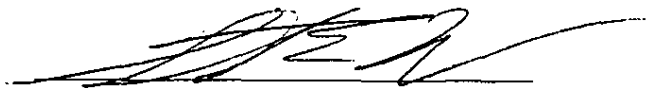
N/A - NO CLAIMS EXIST  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

MEDIBLES FLORIDA, INC  
7708 STATE ROAD 52  
HUDSON, FL 34667  
\_\_\_\_\_

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.

STEPHEN E VALDES, JR  
Printed Name of the Person Filing

  
Signature of the Person Filing