N19000000 850

(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Nar	ne)
(Docu	ment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ing Officer:	

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2019 NOV 13 AH 9: 07

COVER LETTER

TO: Amendment Section Division of Corporations	1			
SUBJECT: Dissolution				
DOCUMENT NUMBER: N19000	000850			
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning thi	s matter to the fol	lowing:		
Adam Grossman				
(Name of Co	ontact Person)			
(Firm/C	Company)			
3909 SW 1st Ave				
(Add	lress)			
Gainesville, FL 32607				
(City/State a	nd Zip Code)			
For further information concerning this matter,	please call:			
Adam Grossman	_{at} (352)	5626403		
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)		
Enclosed is a check for the following amount:				
■ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing F Certified Copy (Additional copenclosed)	Certificate of Status &		
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	A D C	TREET ADDRESS: mendment Section ivision of Corporations lifton Building 661 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: Career Up Now, Inc	
SECOND:	The document number of the corporation (if known): N1900000850	
THIRD:	The file date of the articles of incorporation: 1/25/2019	201
FOURTH	The corporation has not commenced to conduct its affairs.	2019 NOV
FIFTH:	No debts of the corporation remains unpaid.	చ
SIXTH:	Adoption of Dissolution (CHECK ONE) (Note: Cannot be authorized by an incorporator if the corporation has directors)	AH 9: 07
	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.	
Sign	(By the chairman or vice chairman of the board, president or other officer- if directors have not b selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiducia that fiduciary)	een ry, by
	Adam Grossman	
	(Typed or printed name of person signing)	
	Board Member	
	(Title of person signing)	

Filing Fee: \$35