

N21 000 00 4343

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

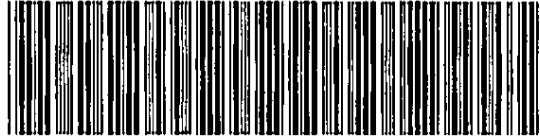
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ja

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION

DOCUMENT NUMBER: N21000004343

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

Please return all correspondence concerning this matter to the following:

KETURIA HINES

(Name of Contact Person)

3 PLUS ME, INC

(Firm Company)

22060 SW 110th PLACE

(Address)

MIAMI, FL 33170

(City State and Zip Code)

For further information concerning this matter, please call:

KETURIA HINES

305

979-0431

(Name of Contact Person)

at (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 Fee & Certified Copy ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
- (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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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:

3 PLUS ME, INC

SECOND: The document number of the corporation (if known): N21000004343

THIRD: The file date of the articles of incorporation: 03-29-2021

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: KETURIA HINES

(By the chairman or vice chairman of the board, president or other officer, if directors have not been selected by incorporators, if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

KETURIA HINES

(Typed or printed name of person signing)

PRESIDENT/DIRECTOR

(Title of person signing)

Filing Fee: \$35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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