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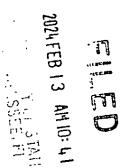
(Requ	estor's Name)	
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(City/S	State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
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Certified Copies	Certificate	s of Status
Special Instructions to Filing Officer:		





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COVER LETTER

TO: Amendment Section	
Division of Corporations	
SUBJECT: Dissolution of Corporation	
DOCUMENT NUMBER:	
The enclosed Articles of Dissolution and	fee are submitted for filing.
Please return all correspondence concerning	<u> </u>
Mary Smith	f Contact Person) BARRELS INC mm/Company) FILE TO THE BOTTON TO THE
	f Contact Person)
LONG HAMMOCK &	BARRELS INC
P.o. Boz 414	E E
(A	Address)
Lake Panasoffkee, FL 33538	
(City/Sta	ate and Zip Code)
For further information concerning this ma	atter, please call:
Mary Smith	at (352-303-9130
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amou	unt:
□ \$35 Filing Fee & S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy Certificate of Status & (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 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

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

FIRST:

	Long Hammock Barrells, Inc.
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized:
	Effective date of dissolution if applicable: December 31, 2023 (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 the articles of incorporation.
S	Gignature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the lands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
:	Mary S. Smith
-	(Typed or printed name of person signing)
1	Director & Registered Agent
_	(Title of person signing)

Filing Fee: \$35