## PO1000024210

(Ře	equestor's Name)	
(Ad	ldress)	
(Ad	Idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



600361610516

03/25/21--01012--011 \*\*35.00





## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations
SUBJECT: TALL ROCK, INC.
DOCUMENT NUMBER: P01000024210
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Dewayne Davidson (Name of Contact Person)
(Name of Contact Person)
TAIL ROUK, INC. (Firm/Company)
SIG3 CHAMPIONS DA.  (Address)  PACR FL, 32571  (City/State and Zip Code)
(Address)
PACE FL, 32571
/ (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at ( 850 - 375 - 7617 (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\Bigsquare \\$43.75 Filing Fee & \$\Bigsquare \\$43.75 Filing Fee & \$\Bigsquare \\$52.50 Filing Fee, \$\Bigsquare \Bigsquare \\$52.50 Filing Fee, \$\Bigsquare \Bigsquare \Bigsqua
Mailing Address:Street Address:Amendment SectionAmendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street. Suite 810

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403. Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State: $TALLROCK_INC.$	
SECOND:	The document number of the corporation (if known): P0100024210	
THIRD:	The date dissolution was authorized:	
	Effective date of dissolution <u>if applicable:</u> (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 and the articles of incorporation.	
•	Signature:  (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)  AULDSON  (Typed or printed name of person signing)  PARSIDRAT TAU ROCK INC.	
	(Title of person signing)	

Filing Fee: \$35