Pod000007669

(Re	questor's Name)	
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(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Voluntary Diss	o lution
DOCUMENT NUMBER: POZ OO OO	27669
The enclosed Articles of Dissolution and fee are subm	nitted for filing.
Please return all correspondence concerning this matte	er to the following:
Lisa Balan (Name of Person	n)
Tax Accounting 5. (Name of Firm/Comp	Financial Assoc., Inc
809 Walker bilt (Address)	Rd., Stc 5
Naples (City/State/and Zip Corfurther information concerning this matter, please	
Same at ((Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certified	al copy is Certified Copy
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

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 o	f State:	
	Tropical Mulch, Inc.		
SECOND:	The document number of the corporation (if known): Po20000	7669	
THIRD:	The date dissolution was authorized: 12/31/2004		T
	Effective date of dissolution if applicable: 12131/2004 (no more than 90 days after dissolution	ASS = =	
FOURTH:	Adoption of Dissolution (CHECK ONE)	FLOA FOIA	C
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	or dissolu	ition
	Dissolution was approved by of the shareholders through voting groups.		
	The following statement must be separately provided for each voting group ento vote separately on the plan to dissolve:	ntitled	
	The number of votes cast for dissolution was sufficient for approval by		
	(voting group)		
	Signed this,		
	0.0/1.0		
	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		
	John Poczatek		
	(Typed or printed name of person signing)	•	
	President		
	(Title of person signing)		

Filing Fee: \$35 + certified copy

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. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Name of Corporation: Tropical Mulch, 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: Date of service Nature of claim, including proposal (s), Dollar amount of chim (if any Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 2289 Bruner Lane Fort Myers, FL 33912 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.

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00