## P02000024462

(Requestor's Name)		
(Address)		
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(City)	/State/Zip/Phone	e #)
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PICK-UP	MAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		
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11/26/29--01030--005 \*\*\$5.00



## **COVER LETTER**

TO: Amendment Section

Division of Corporations			
SUBJECT: BUYERS RESOURCE	& OF CASPARILLA ISLAND, INC		
DOCUMENT NUMBER: PO 2.000024462			
The enclosed Articles of Dissolution and fee are submitted for filing.			
Please return all correspondence concerning t	his matter to the following:		
RICHARD P. H	RICHARD P. HUGGER		
(Name of Contact Person)			
(Firm/Company)			
P.O. BOX 773			
P.O. BOX 773 (Add	ress)		
BOCA GRANDE, 4 (City/State	1 33921		
(City/State	and Zip Code)		
For further information concerning this matter, please call:			
RICHARD P. HUCCER at (941) 270-2816 (Name of Contact Person) (Area Code) (Daytime Telephone Number)			
Enclosed is a check for the following amount			
Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee.  Certified Copy (Additional copy is enclosed)  □ \$52.50 Filing Fee.  Certificate of Status & Certified Copy (Additional copy is enclosed)		
Mailing Address:	Street Address:		
Amendment Section Division of Corporations	Amendment Section Division of Corporations		
P.O. Box 6327	The Centre of Tallahassee		
Tallahassee, FL 32314	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:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	BUYERS RESOURCE OF CASPARILLA ISLAND INC.
SECOND:	The document number of the corporation (if known): FOZ 000.24462
THIRD:	The date dissolution was authorized: OCTOBER 1, 2023
	Effective date of dissolution if applicable:  November: 15, 7823  (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:  Related P Hugger  (By a director, president or other officer - it directors or officers have not been selected, by an incorporator - if in the hands of a receiver, thastee, or other court appointed fiduciary, by that fiduciary)
	RICHARD P. HUSGER (Typed or printed name of person signing)
	DIRECTOR (Title of person signing)

Filing Fee: \$35

## **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:		
The above named corporation is the subject of dissolution and t	he effective date of a dissolution is:	
(date filed with the Dept. if date specif	ied in the Articles of Dissolution)	
Description of information that must be included in a claim:		
Mailing address where written claims can be sent: (Claims cann	not be sent to the Division of Corporations)	
A claim against the above named corporation will be barred unl within 4 years after the filing of this notice.	ess a proceeding to enforce the claim is commenced	
Printed Name of the Person Filing	Signature of the Person Filing	

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