P02000061683

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2019: 3-5 6/10:12

AMT DISS/WHA Notice

AUG 1 0 2019

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Pissolution Seed of Life Inc
DOCUMENT NUMBER: <u>P02000061683</u>
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Yamileth Lociza (Name of Contact Person) Seed of Lik. (Firm/Company)
(Name of Contact Person)
Seed of Life.
1 22
2200 SW 16 Ter
2200 SW 16 TeV (Address) Hiauu, Fl. 33145 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Mamilet Louis at 786 285 75// (Name of Contact Person) (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 \$\Bigcup \\$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee & \$\Bigcup \\$43.75 Filing Fee & Certified Copy (Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee. FL 32301

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:	
	Seed of Life Inc		
SECOND:	: The document number of the corporation (if known): POZODOC	cument number of the corporation (if known): P0200061683	
THIRD:	The date dissolution was authorized: Hard 3/st 20)19	
	Effective date of dissolution if applicable: March 31 st	2019	
	Note: If the date inserted in this block does not meet the applicable statutory filing require not be listed as the document's effective date on the Department of State's records.	on file date) iments, this date will	
FOURTH:	: Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cas was sufficient for approval.	t for dissolution	
	 Dissolution was approved by the shareholders through voting groups. 		
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled	
	The number of votes east for dissolution was sufficient for approval by	201	
	Owner-President	· · · · · · · · · · · · · · · · · · ·	
	(voting group)	(_7	
	A	<u>.</u>	
	January.	12	
	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)		
	Yamileth Louis		
	(Typed or printed name of person signing)		
	President		
	(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: Seed of Life In C
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
Harre for the Claimant reason of claim date of the claim sitches suppened address and city and state where claimed situation happened.
gotte where chimed situation happened.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
2200 SW 16 Ter Miami, Fl 33145
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.
Vamileth Louise Jaium
Printed Name of the Person Filing Signature of the Person Filing