# Po2000070520

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
Shirtin Turmin  Aith Allostich  Citato		
Office Use Only		



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10/13/20--01017--007 \*\*35.00

2020 ' 13 PHI2: 20

EFFECTIVE DATE

13/3/00

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

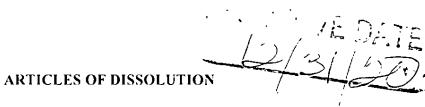
SUBJECT: Corporate disolutionment				
DOCUMENT NUMBER: P02000070520	<del> </del>			
The enclosed Articles of Dissolution and for	ce are submitted for filing			
Please return all correspondence concerning this matter to the following:				
Sharon Tugman				
(Name of	Contact Person)			
Wisteria Cottage Inc				
(Firm/Company)				
27124 NW 203rd Place				
(Address)				
High Springs, FL 32643				
(City/State and Zip Code)				
For further information concerning this mat	ter, please call:			
Sharon Tugman	352-363-8031 at (			
(Name of Contact Person)		Daytime Telephone Number)		
Enclosed is a check for the following amou	nt:			
■ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (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



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:  Wisteria Cottage Inc				
SECOND:	The document number of the corporation (if known):				
THIRD:	The date dissolution was authorized: 8 31 200				
	Effective date of dissolution if applicable:  (no more than 90 days after dissolution file  Note: If the date inserted in this block does not meet the applicable statutory filing requirements 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.				
		2029 -			
		. 13 PH 12: 20			
	Signature: Tharon Dugman	2. 20			
	(By a director, president or other officer Ut 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)				
	Sharon Tugman				
	(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: Wisteria Cottage Inc	
The above named corporation is the subject of dissolution 12/31/20	and the effective date of a dissolution is:
	specified in the Articles of Dissolution)
Description of information that must be included in a claim	n:
Copy of invoice	
Description of payment terms	
Mailing address where written claims can be sent: (Claims	cannot be sent to the Division of Corporations)
27124 NW 203rd Place, High Springs, FL 32643	
A claim against the above named corporation will be barre within 4 years after the filing of this notice.	ed unless a proceeding to enforce the claim is commenced
Sharon Tugman	Signature of the Person Filing
Printed Name of the Person Filing	Signature of the Herson Filing

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