

P03000004491

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

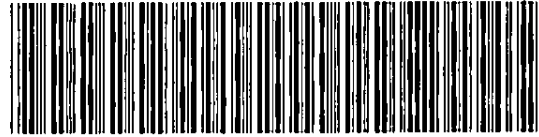
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

KEENAN VISTA, INC.

Please Debit FCA000000003 For: 35

Thank you Seth Neeley



Signature

Requested by:

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ ☒ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ ☒ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

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: Keenan Vista, Inc.

SECOND: The document number of the corporation (if known): P03000004491

THIRD: The date dissolution was authorized: December 15, 2023

Effective date of dissolution if applicable: _____

(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)

Dale Chynoweth

(Typed or printed name of person signing)

Executive Vice President

(Title of person signing)

Filing Fee: \$35

Notice of Corporate Dissolution

FILED

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claim 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: Keenan Vista, Inc.

The above named corporation is the subject of dissolution and the effective date of a dissolution is: December 15, 2023

(date filed with the Dept. if date specified in the Articles of Dissolution)

Description of information that must be included in a claim:

The identify of the parties involved, a detailed account of the nature of the claim(s), any documents

referenced in such account, the relief sought by the claimant(s), and any other information relevant to

such claim(s).

Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations)

Conrad J. Boyle, Esq.

Mombach, Boyle, Hardin & Simmons, P.A.

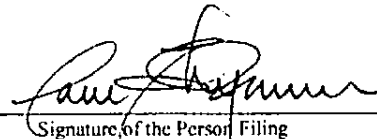
100 NE 3rd Ave, Suite 1000

Fort Lauderdale, Florida 33301

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.

Dale Chynoweth

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