

PD3000108561

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone#)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 FEB 17 AM 11:21

C.L.
2-19-15

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Kubed, Inc

DOCUMENT NUMBER: PD3000108561

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kay Fleischaker

(Name of Contact Person)

Kubed, Inc

(Firm/Company)

2370 S.W. College Road Unit104

(Address)

Ocala, Florida 34471

(City/State and Zip Code)

For further information concerning this matter, please call:

Kay Fleischaker

(Name of Contact Person)

at (**352**) **369-0447**

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$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
Clifton Building
2661 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:
Kubed, Inc

SECOND: The document number of the corporation (if known): PO3000108561

THIRD: The date dissolution was authorized: December 30, 2014

Effective date of dissolution if applicable: December 31, 2015
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

All Partners

(voting group)

Signature: Kay Fleischaker

(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)

Kay Fleischaker

(Typed or printed name of person signing)

Partner

(Title of person signing)

Filing Fee: \$35

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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: Kubed, 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:

Name/Address/Phone# of Individual or Company

Name & No. of Items with Cost of each individual item

Date of Purchase Invoice w/copy or Date of Sale w/Sales Slip

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

Kay Fleischaker

2020 S.W. 15th Lane

Ocala, FL 34471

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.

Kay Fleischaker

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