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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: PRESSED 4 T	TIME, INC.
DOCUMENT NUMBER: P0400	0099429
The enclosed Articles of Dissolution and f	fee are submitted for filing.
Please return all correspondence concerning	ng this matter to the following:
Stuart Goldberg	
(Name of	Contact Person)
Law Offices of Stuart	t E. Goldberg, PL
(Firm	m/Company)
Post Office Box 1245	58
Tallahassee, FL 323	Address)
(City/Sta	ate and Zip Code)
For further information concerning this ma	atter, please call:
Stuart Goldberg	at (850_) 222-4000
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amou	unt:
\$35 Filing Fee \$43.75 Filing Fee & 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: 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 FOR PRESSED 4 TIME, INC.

Pursuant to Section 607.1403 of the Florida Statutes, the undersigned corporation adopts these Articles of Dissolution.

ARTICLE I

The name of the corporation is Pressed 4 Time, Inc.

ARTICLE II

The Articles of Incorporation were filed effective July 1, 2004, and assigned document number P04000099429.

ARTICLE III

The dissolution was authorized on December 10, 2014. The effective date of the dissolution is December 10, 2014.

ARTICLE IV

The dissolution was approved by the sole shareholder. The number of votes cast for dissolution was sufficient for approval.

DATED this _____ day of December, 2014.

Pressed 4 Time, Inc., a Florida corporation

Jane E. Greenfield, President

STATE OF FLORIDA COUNTY OF LEON

THE FOREGOING INSTRUMENT was acknowledged before me this _____ day of December, 2014, by Jane E. Greenfield, President of Pressed 4 Time, Inc., a Florida corporation, on behalf of the corporation, who is personally known to me or is produced a Florida drivers license as identification.

Type/Print Notary name
Notary Public

Commission No.

My Commission Expires



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.

Name of Corporation: Pressed 4 Time, 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:

- 1) The amount of the claim.
- 2) The basis of the claim.
- 3) Whether the claim is contingent or not.
- 4) Documentation supporting the claim.

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

Pressed 4 Time, Inc. Attn: Jane E. Greenfield 6658 Landover Circle Tallahassee, Florida 32317

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.

Jane E. Greenfield

Printed Name of the Person Filing

Signature of the Berger Filing

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