P0600069703

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: DIGOLVING CORP
DOCUMENT NUMBER: P0600069703
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MARITA M VENTHERALL (Name of Contact Person)
VEATHERALL & DESCOC. (Firm/Company)
148 6 E 73 RD 6 T (Address)
OTARKE FL 32091 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (552 A73-5909 (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 \$\ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is enclosed) (Additional copy is enclosed)
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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:	
SECOND:	The document number of the corporation (if known): POGCCOOG9703	
THIRD:	The date dissolution was authorized: $1-9-2024$	
	Effective date of dissolution <u>if applicable</u> : 12-31-2023 (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:	the articles of incorporation.	
	YE5	
Si	gnature: (By a director, president or other officer - it 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)	
_	MARTHA MEEUE VENTHERALL (Typed or printed name of person signing)	
_	(Title of person signing)	

Filing Fee: \$35