(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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## **COVER LETTER**

Division of Corporations
SUBJECT: ARTICLES OF DISSOUTION
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Edward A. Roberson  (Name of Contact Person)
Tropical Island Treats Inc (Firm/Company)
684 Scrubes Circle (Address)
Canton DC 28716 (City/State and Zip Code)
For further information concerning this matter, please call:
Cheryl Roberson at (386) 788 713Z (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigs\tag{\$43.75 Filing Fee & \$\bigs\tag{\$43.75 Filing Fee & \$\bigs\tag{\$52.50 Filing Fee, } \\ Certificate of Status & Certified Copy & Certificate of Status & Certified Copy & (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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	•
	Tropical Island Treats, Inc.		
SECOND:	The document number of the corporation (if known): Po 600007	06	88
THIRD:	The file date of the articles of incorporation: $12-31-20$		
FOURTH:	(CHECK AT LEAST ONE BOX)		
	None of the corporation's shares have been issued.		
	☐ The corporation has not commenced business.		
FIFTH:	No debt of the corporation remains unpaid.		
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	12	DIVIS
SEVENTH:	Adoption of Dissolution (CHECK ONE)	1PR 3	ORE T
	A majority of the incorporators authorized the dissolution.	APR 30 / PH 3:	ARY OF
	A majority of the directors authorized the dissolution.	င္ဘ	SJAJIZ ORALIÐNS
Signa	(By a director, president or other officer - if directors or officers have not been selected, by an incorpin the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	orator	- if
	Edward A. Roberson (Typed or printed name of person signing)		
	President (Title of Person Signing)		

Filing Fee: \$35