## Polo00154171

(Re	questor's Name)	
(Ad	dress)	<u> </u>
(Ad	dress)	
(Cit	y/State/Zip/Phone	<del>:</del> #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Disolution of Corporation	
DOCUMENT NUMBER: <u>P06000/5 4/7/</u>	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
David L. Boyd	
(Name of Contact Person)	
GDJA Business Enterprise, Inc. (DBA as Box and Send)	
(Firm/Company)	
1024 Highway AIA Suite 156	
Satellite Beach FL 32937	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
David L. Boyd at ( 321 ) 7773440	
David L. Boyd  (Name of Contact Person)  at ( 321 ) 7773440  (Area Code & Daytime Telephone Number)	r)
Enclosed is a check for the following amount:	
\$\sqrt{35}\$ Filing Fee \$\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\	
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle	

Tallahassee, FL 32301

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation at the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State
	GDJA Business Enterprise, Inc.
SECOND:	The document number of the corporation (if known): P0600015417/
THIRD:	The file date of the articles of incorporation: December 18-106
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.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	✓ A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.

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.)

DAVID L BOYD

(Typed or printed name of person signing)

(Title of Person Signing)

## **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: GDJA Business Enterprise, Inc.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
Name, date of indebtness, amount
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
1024 Highway AIA Suite 156
1024 Highway AIA Suite 156 Satellite Beach
FLorida 32937
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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.
David L. Boyd  Printed Name of the Person Filing  Signature of the Person Filing