P09 0000 75609

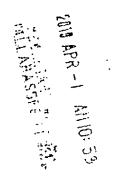
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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COVER LETTER

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

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<i>#</i>	VEN DETTER	€.	
TO: Amendment Section			c ·
Division of Corporations			
SUBJECT: DISSOLUTION OF CORPORATION	NG		<u> </u>
DOCUMENT NUMBER: P09000075609			
The enclosed Articles of Dissolution and f	ee are submitted for filing	<u>s</u> .	
Please return all correspondence concerning	g this matter to the follow	ving:	
MARLAC	OPELAND ESTY		
(Name of	Contact Person)		
ADVANCED BUSINESS CONNECT	ON, DBA EASY TAX AND	ACCOUNTING LLC	
(Fire	n/Company)		
18467 NW US I	IWY 441, SUITE 70		
(A	ddress)		
HIGH SPR	INGS, FL 32643		
(City/Sta	te and Zip Code)		
For further information concerning this ma	tter, please call:		
MARLA ESTY	at (at		
(Name of Contact Person)	(Area Code)	(Daytime Telephone Num	iber)
Enclosed is a check for the following amou	int:		
■ \$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	STR	FET ADDRESS:	

Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

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:					
	STEVEN MASTERS INC.					
SECOND:	The document number of the corporation (if known):					
THIRD:	The date dissolution was authorized: DECEMBER 31, 2018					
	Effective date of dissolution if applicable:					
	(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:	RTH: 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					
	STEVEN MASTERS					
	(voting group)					
	St. no. NO-t					
	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)					
	STEVEN MASTERS					
	(Typed or printed name of person signing)					
	PRESIDENT					
	(Title of person signing)					

Filing Fee: \$35

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 requ	uired when filing a voluntary dissolution.
Name of Corporation: STEVEN MASTERS INC.	
Date of dissolution will be the date the dissolution is filed with the specified in the Articles of Dissolution.	e Department of State or as
Description of information that must be included in a claim:	
Mailing address where claims can be sent: (Claims cannot be sen	t to the Division of Corporations)
18467 NW US HWY 441, SUITE 70 HIGH SPRINGS, FL 32643	
A claim against the above named corporation will be barred unless within 4 years after the filing of this notice	ss a proceeding to enforce the claim is commenced
	At Mark
STEVEN MASTERS	Slever Masters
Printed Name of the Person Filing	Signature of the Person Filing