

P10000028337

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

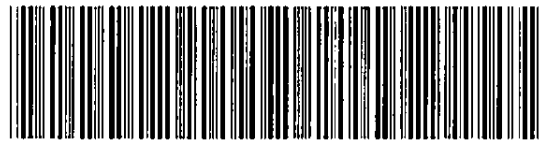
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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08/22/24--01017--013 **52.50

CLD
08/22/24 PM 12:43
CLERK OF STATE
TALLAHASSEE, FL

CLERK

08/22/24

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of a Corporation

DOCUMENT NUMBER: P10000028337

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

William Greaves

(Name of Contact Person)

Diversified Marine Service Inc.

(Firm/Company)

221 Bilbao Dr.

(Address)

St. Augustine, FL 32084

(City/State and Zip Code)

For further information concerning this matter, please call:

William Greaves at (904) 806-0656

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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:

Diverisified Marine Service Inc.

SECOND: The document number of the corporation (if known): P10000028337

THIRD: The file date of the articles of incorporation: 04/01/2010

FOURTH: None of the corporation's shares have been issued.

FIFTH: No debt of the corporation remains unpaid.

SIXTH: The net assets of the corporation remaining after winding up, if any, have been distributed to the shareholders, if shares were issued.

SEVENTH: A majority of the incorporators or 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.)

William Greaves

(Typed or printed name of person signing)

Owner

(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 required when filing a voluntary dissolution.

Name of Corporation: Diverisified Marine Service Inc.

The above named corporation is the subject of dissolution and the effective date of a dissolution is: _____

August 17, 2024

(date filed with the Dept. if date specified in the Articles of Dissolution)

Description of information that must be included in a claim:

Due to Covid and personal medical
issues, Corp. has not operated since
2021.

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

221 Bilbao Dr
St. Augustine, FL 32086

RECEIVED
FL STATE
PH 12-43
30

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.

William Greaves

Printed Name of the Person Filing

William Greaves

Signature of the Person Filing

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