

P10000007230

(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



200198938492

03/23/11--01012--020. **35.00

UD/wthart

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

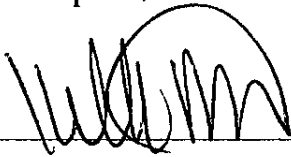
11 MAR 23 PM 3:37

FILED

2-723-23-11

AFFIDVIT

I am Kellie Richter, the sole principal and President of What the Flower Inc., (for profit), document#P10000087230. By this notice I allow the use and will remain a principal in What the Flower, Inc. (not for profit) and have no intention of revoking the dissolution attached. Also attached you will find the incorporation documents for the not for profit, What the Flower, Inc.

A handwritten signature in black ink, appearing to be 'Kellie Richter', written over a horizontal line.

Kellie Richter

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of What the Flower, Inc

DOCUMENT NUMBER: P10000087230

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

Please return all correspondence concerning this matter to the following:

Kellie Richter
(Name of Contact Person)

What the Flower, Inc
(Firm/Company)

1025 93 Street, Unit 4
(Address)

Bay Harbor Islands, FL 33154
(City/State and Zip Code)

For further information concerning this matter, please call:

Kellie Richter at (786) 375-0611
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$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:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FILED
11 MAR 23 PM 3:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation as currently filed with the Florida Department of State:

What the Flowers, Inc.

SECOND: The document number of the corporation (if known): 00000087230

THIRD: The date dissolution was authorized: 03/18/2011

Effective date of dissolution if applicable: 0000
(no more than 90 days after dissolution file date)

FOURTH: 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

(voting group)

FILED
11 MAR 23 PM 3:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

Kellie Richter
(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 required when filing a voluntary dissolution.

Name of Corporation: What the Flower, Inc.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

Services Rendered, Authorized by, Date,
Amount & Description.

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

Kellie Richter
1025 93 St.
Bay Harbor Islands, FL
33154

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.

Kellie Richter
Printed Name of the Person Filing

[Signature]
Signature of the Person Filing