# Plooostala

(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:  FEB - 3 2024

Office Use Only



600421091776

01/03/24--01042--005 \*\*37.00



## COVER LETTER

**Division of Corporations** SUBJECT: Articles of Dissolution P10000095672 DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Allison Grant (Name of Contact Person) Allison Grant, P.A. (Firm/Company) 29 Hawks Branch Circle (Address) Fairview, North Carolina 28730 (City/State and Zip Code) For further information concerning this matter, please call: at ( ) 562-7236 (Area Code & Daytime Telephone Number) Allison Grant (Name of Contact Person) Enclosed is a check for the following amount: ■ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **Mailing Address:** Street Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

**TO:** Amendment Section

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# ARTICLES OF DISSOLUTION

24 Jan 3 18 18 26 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:  Allison Grant, P.A.
SECOND:	The document number of the corporation (if known):
THIRD:	The file date of the articles of incorporation: 11/23/2010
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.
Sigr	nature: Mun Dat
Ç	(By addrector, 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.)
	Allison Grant
	(Typed or printed name of person signing)
	President
	(Title of Person Signing)

Filing Fee: \$35