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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : SMITH HULSEY & BUSEY

Account Number : 075030000653 Phone : (904)359-7700 Fax Number : (904)359-7708

DISSOLUTION OR WITHDRAWAL

SUN TIRE & AUTOMOTIVE SERVICE OF TALLAHASSEE,#2, INC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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JAN 27 2021

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Fax:

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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: Sun Tire & Automotive Service of Tallahassee #2, Inc. The document number of the corporation (if known): P11000018806		
SECOND:			
THIRD:	The date dissolution was authorized:		
	Effective date of dissolution <u>if applicable:</u> (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:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.		
\$	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)		
	Fred Christensen		
	(Typed or printed name of person signing)		
	Chief Financial Officer and Treasurer		
	(Title of person signing)		

Filing Fee: \$35

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From: Fax Admin

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: Sun Tire & Automotive Service of Tallahassee #2, Inc.	
The above named corporation is the subject of dissolution and the effecti	ve date of a dissolution is:
the date filed with the Department of State	
(date filed with the Dept if date specified in the Ar	ticles of Dissolution)
Description of information that must be included in a claim:	
The identity and contact information for the person or entity asserting the claim	, a description of the basis for the claim,
the date the claim arose, the amount of the claim, and a detailed description of t	he facts and circumstances underlying
the claim.	
Mailing address where written claims can be sent: (Claims cannot be sen	t to the Division of Corporations)
358 Saw Mill River Road	
Millwood, NY 10546	
A claim against the above named corporation will be barred unless a pro- within 4 years after the filing of this notice.	ceeding to enforce the claim is commenced
Fred Christensen	To all
Printed Name of the Person Filing	Signature of the Person Filing

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