| (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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Office Use Only



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COVER LETTER

TO: Amendment Section

| Division of Corporations | | |
|---|---|--|
| SUBJECT: Dissolution of Gr | eener Ways Distributors, Inc. | |
| DOCUMENT NUMBER: P11000 | 0027084 | |
| The enclosed Articles of Dissolution and | fee are submitted for filing. | |
| Please return all correspondence concerning | ng this matter to the following: | |
| Melissa Green | | |
| (Name of | Contact Person) | |
| (Fir | m/Company) | |
| 7416 Tangelo Avenue | · · · · · · · · · · · · · · · · · · · | |
| Port Richey, FL 34668 | Address) | |
| (City/St | ate and Zip Code) | |
| For further information concerning this ma | atter, please call: | |
| Melissa Green | at (727) 857-5736 | |
| (Name of Contact Person) | (Area Code & Daytime Telephone Number) | |
| Enclosed is a check for the following amo | unt: | |
| □ \$35 Filing Fee ♣ S43.75 Filing Fee & Certificate of Status | □ \$43.75 Filing Fee & □ \$52.50 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 607.1401, 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: | |
|---------|--|-------------------|
| | Greener Ways Distributors, Inc. | |
| SECOND: | The document number of the corporation (if known): P11000027084 | |
| THIRD: | The file date of the articles of incorporation: 03/17/2011 | |
| FOURTH: | (CHECK AT LEAST ONE BOX) | |
| | None of the corporation's shares have been issued. | - SERVICE - CO |
| | ☐ The corporation has not commenced business. | 458 10H St. |
| FIFTH: | No debt of the corporation remains unpaid. | - P |
| SIXTH: | The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued. | 13 FEB -4 PM 2124 |
| SEVENTH | | |
| | A majority of the incorporators authorized the dissolution. | |
| | ☐ A majority of the directors authorized the dissolution. | |
| Sign | nature: (By a director, president or other officer of directors or officers have not been selected, by an incorporator in the hands of a receiver, trustee, or other court appointed following, by that fiduciary.) | - if |
| | Melissa Green | |
| | (Typed or printed name of person signing) | |
| | Chief Executive Officer | |
| | (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: Greener Ways Distributors, 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: Name, Address, and Telephone Number of Creditor. Complete list of goods or services provided but not paid for. Only goods or services provided prior to Dissolution will be considered. Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 7416 Tangelo Avenue Port Richey, FL 34668 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. Melissa Green

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

Printed Name of the Person Filing