P11000013996

(Re	questor's Name)
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	
	Office Use O	nlv



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EFFECTIVE DATE

ANT DISS,

FEB 28 2018

I ALBRITTON

COVER LETTER

TO: Amendment Section

Division of Corporations NEW VISION CORPORATE SUPPLY CO. SUBJECT: P11000073996 DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LES H. STEVENS, ESOUIRE (Name of Contact Person) LES H. STEVENS, P.A. (Firm/Company) 5301 NORTH FEDERAL HIGHWAY, SUITE 130 (Address) **BOCA RATON, FLORIDA 33487** (City/State and Zip Code) For further information concerning this matter, please call: at (561) 989-9797 LES H. STEVENS, ESQUIRE (Name of Contact Person) (Area Code) (Daytime Telephone Number) 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 Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 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:

FIRST:	The name of the corporation as currently filed with the Florida Department of Sta			
	NEW VISION CORPURSE SUPPLY CO.			
SECOND:	The document number of the corporation (if known): P110000	73996		
THIRD:	The date dissolution was authorized: February 19, 2	018		
	Effective date of dissolution if applicable: Franky 28, 2 (no more than 90 days after dis	2014		
	Note: If the date inserted in this block does not meet the applicable statutory filing round be listed as the document's effective date on the Department of State's records.			
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of vote was sufficient for approval.	s cast for dissolution		
	☐ Dissolution was approved by the shareholders through voting group	ps.		
	The following statement must be separately provided for each voting go to vote separately on the plan to dissolve:	roup entitled		
	The number of votes cast for dissolution was sufficient for approval by			
	(voting group)	5 8		
		; <u> </u>		
	Signature: Signature: Signature: (By a director, president or other officer - if directors or officers have not been selected)	1:50		
	(By a director, president or other officer - if directors or officers have not been select an incorporator - if in the hands of a receiver, trustee, or other court appointed fiducia that fiduciary)	ed, by rry, by		
	HENRI L. BERTUCIA (Typed or printed name of person signing)			
	(Typed or printed name of person signing)			
	(Fitle 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. NEW VISION CORPORATE SUPPLY CO. 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, AMOUN OF CLAIM, WRITTON EVIOLE OF CLAIM Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) New Vision Corporare Surpey Co. C/o LES H. STEVENS, P.A. 5301 N. FEDERAL HIGHWAY, SUITE 130 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.