P11000076794

(Requestor's Name)
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(City/State/Zip/Phone #)
(,
PICK-UP WAIT MAIL
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(RM) 2-5-15

COVER LETTER.
TO: Amendment Section Division of Corporations
SUBJECT: Planet Tip DISSOLUTION
DOCUMENT NUMBER: P 110000 76794 500000
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jo- Arre Drury (Name of Contact Person) Plant Tip Loc (Firm/Company) (Address) (Address) (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
To Anne Druny at (352) 702-794/ (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\to\$ \$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) \$\times \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to sarticles of di	section 607.1401, Florida Statutes, this Florida profit corporation submits the following ssolution:
FIRST:	The name of the corporation as currently filed with the Florida Department of State: Plant Tip, Inc.
SECOND:	The document number of the corporation (if known): P11000076799
THIRD:	The file date of the articles of incorporation: Agust 29,201
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	☐ A majority of the directors authorized the dissolution.
Sign	ature: (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.) To-Anne Drung
	To-Anne Drury (Typed or printed name of person signing) TVCOYPOT A+OR (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: Planed Tip IvC
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
Name address, Email
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
1611 / correct Man
1611 Laurel Way Taxares F) 32778
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.