(F	Requestor's Name)		
(/	Address)		
(/	Address)		
((	City/State/Zip/Phone #)		
PICK-UP	MAIL MAIL		
(1)	Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of Status	_	
Special Instructions to Filing Officer:			



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Office Use Only

## **COVER LETTER**

TO: Amendment Section  Division of Corporations
SUBJECT: DISSOLUE COPPARATION
DOCUMENT NUMBER: P 120000 29222
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DAN Fost (Name of Contact Person)
CORPORATE Structure Group SFL (Firm/Company)
1160 Power INE RD (Address)
(Address)
Pond Bch FL 33069 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
DAN FOSH at (877) 548-4291  (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 (Additional copy is enclosed)  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 St			
	TRYSER SFL TNC			
SECOND:	The document number of the corporation (if known): P120000 29222			
THIRD:	The file date of the articles of incorporation: 3- 26-2012			
FOURTH:	(CHECK AT LEAST ONE BOX)			
	None of the corporation's shares have been issued.	4		
	☐ The corporation has not commenced business.	A JAN		
FIFTH:	No debt of the corporation remains unpaid.	,		
SIXTH:	The net assets of the corporation remaining after winding up have been distribute to the shareholders, if shares were issued.	ted		
SEVENTH:	: Adoption of Dissolution (CHECK ONE)			
	A majority of the incorporators authorized the dissolution.			
	A majority of the directors authorized the dissolution.			
Sign				
	(By a director, president or other officer - if directors or officers have not been selected, by an incorpin the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	porator - if		
	TERRY A. RYSER (Typed or printed name of person signing)			
	President (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: 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: Mailing address where claims can be sent; (Claims cannot be sent to the Division of Corporations) 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.

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