

P13000037361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

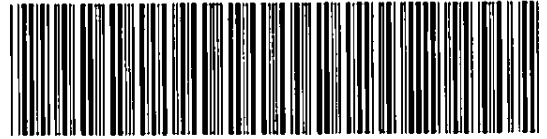
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100426069041

FILED

2024 MAR 21 AM 10:53

CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

RECEIVED

2024 MAR 21 PM 2:55

CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com

ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau
mmoreau@incserv.com
850.656.7953

REQUEST DATE 03/21/2024

PRIORITY Routine

OUR REF # (Order ID#) Courtney

ORDER ENTITY

CordeVentures, Inc.

PLEASE PERFORM THE FOLLOWING SERVICES:

CordeVentures, Inc.

Please file the attached dissolution filing.

NOTES:

\$35.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



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:

CordeVentures, Inc.

SECOND: The document number of the corporation (if known): P13000037361

THIRD: The date dissolution was authorized: 03/07/2024

Effective date of dissolution if applicable: _____

(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.

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CLERK OF STATE
TALLAHASSEE, FLORIDA

Signature: Paul Kahn
Paul Kahn (Mar 17, 2024 11:11 EDT)

(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)

Paul Kahn

(Typed or printed name of person signing)

Chief Financial 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: CordeVentures, Inc.

The above named corporation is the subject of dissolution and the effective date of a dissolution is: _____

(date filed with the Dept. of date specified in the Articles of Dissolution)

Description of information that must be included in a claim:

Claimant name, address, email address, phone number, attorney representation, brief summary of claim, incident date.

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TALLAHASSEE, FLORIDA

Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations)

TheKey, LLC

220 Congress Park Drive, Ste. 330

Delray Beach, FL 33445

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.

Paul Kahn, CFO

Printed Name of the Person Filing

Paul Kahn

Paul Kahn (Mar 17, 2024 14:34 EDT)

Signature of the Person Filing

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