PIUMOHI

| (Re | questor's Name) | |
|---|--------------------|-------------|
| (Ad | dress) | |
| . (Ad | dress) | |
| . (Cit | cy/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
| (Document Number) | | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
| | | |
| | | |
| | | |
| | | |

Office Use Only



800272352198

05/01/15--01018--016 **35.00

MAY 07 2015
R. WHILE

COVER LETTER

| TO: Amendment Section Division of Corporations | |
|--|---|
| SUBJECT: PROFIT ARTICLES OF DI OF SHARES OR COM | SSOLUTION (PRIOR TO THE ISCUANCE MENCEMENT OF BUSINESS) |
| DOCUMENT NUMBER: P1400 | 0034977 |
| The enclosed Articles of Dissolution and fee are | submitted for filing. |
| Please return all correspondence concerning this | matter to the following: |
| STEPHEN E VAU (Name of Conta | DES JR |
| (Name of Conta | ct Person) |
| NATURALLY INF (Firm/Con | PUSED, INC. |
| 7708 STATE R | |
| • | • |
| HUDSON, FC 3 | |
| For further information concerning this matter, p | • |
| STEPHEN E VACUES TR. (Name of Contact Person) | at (727) 798-7027 (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: | |
| Certificate of Status Ce (Ad | 3.75 Filing Fee & Status & Certificate of Status & Certified Copy (Additional copy is enclosed) |
| MAILING ADDRESS: | STREET ADDRESS: |
| Amendment Section Division of Corporations | Amendment Section 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 607.1401, 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: | | |
|----------|--|--|--|
| | NATURALLY INFUSED INC. | | |
| SECOND: | The document number of the corporation (if known): P14 0000 34977 | | |
| THIRD: | The file date of the articles of incorporation: $\frac{4/17/2014}{}$ | | |
| 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 | (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.) | | |
| | TEPHEN E VALDES JR (Typed or printed name of person signing) | | |
| | VICE PRESIDENT / REGISTERED AGENT (Title of Person Signing) | | |

٠. ٦

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: NATURALLY INFUSED, 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: N/A - NO CLAIMS EXIST Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) NATURALLY INFUSED, INC 7708 STATE ROAD 52 HUDSON, FC 34667 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. Signature of the Person Filing

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