

P14 0000 47700

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

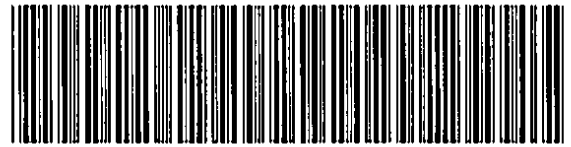
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800341974028

03/18/20--01001--007 \$495.00

FILED
2020 MAR 16 PM 12:20
SECURITY & COMPLIANCE
TALLAHASSEE, FL

MAR 27 2020
C Kinsey

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: S. MARTINEZ HARVESTING, INC

DOCUMENT NUMBER: P14000047700

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SILVERIO MARTINEZ

(Name of Contact Person)

S. MARTINEZ HARVESTING, INC.

(Firm/Company)

110 BLUE MOON AVE.

(Address)

LAKE PLACID, FL 33852-8734

(City/State and Zip Code)

For further information concerning this matter, please call:

SILVERIO MARTINEZ

(Name of Contact Person)

at (863) 441-2076

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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:
S. MARTINEZ HARVESTING, INC.

SECOND: The document number of the corporation (if known): P14000047700

THIRD: The date dissolution was authorized: 12/31/2019

Effective date of dissolution if applicable: 12/31/2019

(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.

Signature: SMTZ

(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)

SILVERIO MARTINEZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

FILED
2020 MAR 16 PM 12:20
SEC. TALLAHASSEE, FL

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: S. MARTINEZ HARVESTING, INC.

The above named corporation is the subject of dissolution and the effective date of a dissolution is: 12/31/19

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

Description of information that must be included in a claim:

THE LEGAL NAME, ADDRESS, AND CONTACT INFORMATION OF THE ENTITY ASSERTING THE CLAIM
MUST BE INCLUDED IN A WRITTEN CLAIM. THE CLAIM MUST BE FILED NO LATER THAN THE TERM
STIPULATED BY FLORIDA STATUTES. INCLUDE THE IDENTIFICATION OR DESCRIPTION OF THE
AGREEMENT OR CIRCUMSTANCES IN WHICH THE CLAIM AROSE, THE AMOUNT OF THE CLAIM, AND
INFORMATION AND RELEVANT DOCUMENTS THAT ARE USEFUL TO VERIFY NATURE AND AMOUNT.

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

110 BLUE MOON AVE.

LAKE PLACID, FL 33852-8734

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.

SILVERIO MARTINEZ

Printed Name of the Person Filing

SMTZ

Signature of the Person Filing

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

FILED
2021 MAR 16 PM 12:20
TALLAHASSEE, FL