P15000031197

(Re	equestor's Name)					
(Address)						
(Ac	ldress)					
(Ci	ty/State/Zip/Phon	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	Certificate	s of Status				
Special Instructions to Filing Officer:						

Office Use Only



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03/14/16--01017--010 **43.75

2016 MAR 14 PH 5: 35
SECRETARY OF STATE

MAR 1.7 2016

C. CARROTHERS

COVER LETTER

	şî .
TO: Amendment Section Division of Corporations	
SUBJECT: DISSOIVE (orporation
DOCUMENT NUMBER:	0 36/97
The enclosed Articles of Dissolution and fee a	re submitted for filing.
Please return all correspondence concerning the	is matter to the following:
DANIEL (Name of Con	Fosh
·	ture Group SFL ompany)
1160 Powerline	
Pompano Bo (City/State a	h FL 33069 nd Zip Code)
For further information concerning this matter,	
Name of Contact Person)	at (877) 548-429 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	,
Certificate of Status (A	\$43.75 Filing Fee & \$\simeg \\$52.50 Filing Fee, Certified Copy Additional copy is enclosed) \$\square \\$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 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 Stat	e:				
	J STEVENS SFL INC					
SECOND:	The document number of the corporation (if known): 1500036197					
THIRD:	The file date of the articles of incorporation: $\frac{4-21-2015}{}$					
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:	No debt of the corporation remains unpaid. 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 sent or other officer - if directors or officers have not been selected, by an incorporate in the Wends of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.) Stans (Typed or printed name of person signing) (Title of Person Signing)	or - if				
	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:	U	STEVENS	SFL	INC	
Date of dissolution will be t specified in the Articles of I			ith the Depar	tment of State or as	
Description of information	that must b	e included in a claim	:		
The to PA	Comp	ANY CAN Le ANNUI	No L	ONGCE AF S AND T IS FORCED	Ford the
taxes.		he Corpa	cation	15 Forced	1 to
Disso	lve,	· · · · · · · · · · · · · · · · · · ·	, ,, ,, ,, ,, ,,, ,,,,,,,,,,,,,,,,,,,		
Mailing address where cláin Lospi H60 Pom 1				División of Corporations) SFL 69	,
A claim against the above na within 4 years after the filing	g of this no		unless a proc	Signature of the Person Fi	m is commenced

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