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## COVER LETTER **TO:** Amendment Section Division of Corporations SUBJECT: DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Address) (City/State and Zip Code) For further information concerning this matter, please call: Enclosed is a check for the following amount: faid already. □ \$35 Filing Fee \$\dagge \dagge \da 🗖 \$43.75 Filing Fee & 🔲 \$52.50 Filing Fee. Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy

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

enclosed)

(Additional copy is



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 Plorida Department of State: The document number of the corporation (if known): SECOND: The file date of the articles of incorporation: THIRD: (CHECK AT LEAST ONE BOX) FOURTH: 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. Adoption of Dissolution (CHECK ONE) SEVENTH: A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution. Signature: (By a director, president her officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trus ted name of person signing)

Filing Fee: \$35

(Title of Person Signing)

### 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 filling 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