

FILED
Mar 22, 2016
Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:
GATEWAY WHOLESALE AUTO SALES INC

SECOND: The document number of the corporation: P15000079349

THIRD: The file date of the articles of incorporation: September 25, 2015

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.

SEVENTH: A majority of the directors authorized the dissolution.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: TAMELA HOFFMAN

AGENT/ OFFICE MANAGER

Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative

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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.

Name of Corporation:

GATEWAY WHOLESAL AUTO SALES 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:

THE COMPANY HAS CLOSED. UNABLE TO PAY BILLS. THE STATE NEEDS TO KNOW THE OWNER IS WORKING UNDER THE TABLE. BUYING AND SELLING AUTO PARTS AND REFUSING TO SHOW ANY RECEIPTS OR PAPERWORK AS OF 2-29-16

Mailing address where claims can be sent:

416 SEAWORTHY RD
416 SEAWORTHY RD
NORTH FT MYERS, FL 33903 UN

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.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: TAMELA HOFFMAN

Electronic Signature of the Person Filing