

P 16 0000 11950

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6380

From:

Account Name : GUNSTER, YOAKLEY & STEWART, P.A.  
Account Number : 076117000420  
Phone : (561)650-0728  
Fax Number : (561)671-2527

**DISSOLUTION OR WITHDRAWAL  
DIVERSITYINC DATA CORP.**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
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| Page Count            | 02      |
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**ARTICLES OF DISSOLUTION  
OF  
DIVERSITYINC DATA CORP.  
(A Florida Profit Corporation)**

*Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation, submits the following Articles of Dissolution:*

1. The name of this Florida corporation is: DIVERSITYINC DATA CORP. (the "Corporation").

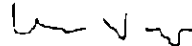
2. The document number of the Corporation is P16000011950.

3. The dissolution was approved as of April 11, 2023. The effective date of dissolution shall be April 11, 2023.

4. Dissolution was unanimously approved by the holders of all of the issued and outstanding of the capital stock of the Corporation.

DATED: As of April 11, 2023

**DIVERSITYINC DATA CORP.**



By: \_\_\_\_\_  
Name: Lucas J. Visconti  
Title: President

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## NOTICE OF CORPORATE DISSOLUTION

This Notice of Corporate Dissolution is submitted by the dissolving corporation named below for resolution of payment of unknown claims against this corporation as provided in Section 607.1407, Florida Statutes.

**Name of Corporation:** DIVERSITYINC DATA CORP.

**Document Number of Corporation:** P16000011950.

**Date of Dissolution:** as of April 11, 2023.

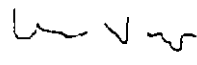
**Description of Information that must be included in a written claim:** The information that must be included in a claim submitted pursuant to this Notice shall be as follows:

- (a) Name, address and telephone number of claimant.
- (b) Amount of claim, including, if applicable, principal, interest, penalties or other fees or charges.
- (c) A statement of the basis for the claim.
- (d) A copy of any and all writings evidencing the claim or upon which the claim is based.
- (e) A statement of whether or not the claimant has other claims against the corporation or its directors, officers, agents or representatives, in their capacities as such, and, if the claimant states that the claimant has other claims, a statement of whether or not such other claims are being submitted pursuant to this Notice, or if such other claims will not be so submitted, a statement as to the reason why.

**Mailing address where claims can be sent:** A claim submitted pursuant to this Notice shall be mailed by certified or registered mail, return receipt requested, postage prepaid, to the following party: DIVERSITYINC DATA CORP., 3300 South Dixie Highway, Suite 1-125, West Palm Beach, Florida 33405, Attn: Lucas J. Visconti.

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.

**DIVERSITYINC DATA CORP.**

  
 By: \_\_\_\_\_  
 Name: Lucas J. Visconti  
 Title: President