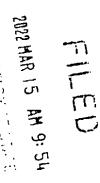
P16000071510

(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:					



600383250926

dessolution with notice 03/15/22-01019-027 #35.00



A. RAMSEY MAR 2 9 2022

COVER LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: Dissolution of Mikkelson Managemen
DOCUMENT NUMBER: P16000071510
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kathenne (Kate) Mikkelson (Name of Contact Person)
Mikkelson Management
Mikkelson Management (Firm/Company)
5023 SW Winchester De
5023 SW Winchester Dr (Address)
Stuan Fr 34991
Stuan F 34991 (City/State and Zip Code)
For further information concerning this matter, please call:
Kate Mikkelson at (772) 708-9244 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status & Certificate of Status & Certificate of Status & Certificate of Status & Certificate Copy (Additional copy is enclosed) (Additional copy is enclosed)
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION 22 HAR 15 AM 9: 55

FIRST: The name of the corporation as currently filed with the Florida Department of State: Mikkelson Management, Inc. The document number of the corporation (if known): 1716 0000 715i0 SECOND: The file date of the articles of incorporation: 2 - 9 - 2021THIRD: FOURTH: None of the corporation's shares have been issued. FIFTH: No debt of the corporation remains unpaid. SIXTH: The net assets of the corporation remaining after winding up, if any, have been distributed to the shareholders, if shares were issued. SEVENTH: A majority of the incorporators or directors authorized the dissolution. Signature: (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.) (Typed or printed name of person signing) President

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following

articles of dissolution:

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.

danie of Corporation	1-1126.013011	1.160.147.	1 - Library	<u> </u>	
he above named corpo	ration is the subject of	dissolution and the	effective date of a	a dissolution is: <u>(2 </u>	31-20
•					
	(date filed with	the Dept, it date specified	in the Articles of Dissolu	ition)	
escription of informati	on that must be include	ed in a claim:			
				4-14	
				<u>, .,,</u>	
ailing address where v	written claims can be so	ent: (Claims cannot	be sent to the Div	rision of Corporations)	
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1-10-10-10-10-10-10-10-10-10-10-10-10-10					
					
		will be barred unles	s a proceeding to	enforce the claim is con	nmenced
thin 4 years after the	filing of this notice.				
i/	17. 3. 14		i/	. 1	
Jute M	INCKCISON I Name of the Person Filing		Tak-	Mille	
Printed	Name of the Person Filing		Signatui	re of the Person Filing	

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