P16000088907

(Requestor's Name)
(Address)
(1.2.2.2)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
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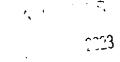
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10/16/23--01016--019 **35.00

FILED 2023 OCT 16 PM 3: 21 SEE : 10 - 10 - 25 FL



COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Dissolution		
DOCUMENT NUMBER: P16000088907		
The enclosed Articles of Dissolution and for	ee are submitted for filing	<i>]</i> ,
Please return all correspondence concerning	g this matter to the follow	ing:
Carole Robertson		
(Name of 0	Contact Person)	<u> </u>
Gulf Life Realty Co., Inc		
(Firm	n/Company)	
4680 H Placida Rd		
(Ac	ddress)	
Englewood, FL 34224		
(City/Stat	te and Zip Code)	·
For further information concerning this mat	ter, please call:	
Carole Robertson	at (at (
(Name of Contact Person)		(Daytime Telephone Number)
Enclosed is a check for the following amou	nt:	
■ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, 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 State:			
	Gulf Life Realty Co. Inc			
SECOND:	ND: The document number of the corporation (if known):			
THIRD:	The date dissolution was authorized: 10-12-2023			
	Effective date of dissolution if applicable: (no more than 90 days after dissolution TR date)			
	not be listed as the document's effective date on the Department of State's records.			
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.			
	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 tiduciary, by that fiduciary)			
	Carole Robertson			
	(Typed or printed name of person signing)			
	CEO			
	(Title of person signing)			

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: ____ Gulf Life Realty Co. Inc. The above named corporation is the subject of dissolution and the effective date of a dissolution is: (date filed with the Dept. if date specified in the Articles of Dissolution) Description of information that must be included in a claim: Company office was destroyed by Hurricane Ian. I lost everything, all office equipment, computers, etc. Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations) 9253 Steubenville Ave. Englewood FL 34224 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. Carole Robertson Printed Name of the Person Filing

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