91700013911

(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:

Office Use Only

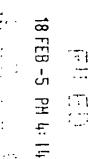


800308535118

02/05/18--01038--009 **35.00

Morph

R. WHITE FEB 0 6 2018



COVER LETTER

TO: Amendment Section						
Division of Corporatio	ns.					
SUBJECT: Dries Teamwork Corpora	tion 					
DOCUMENT NUMBER: P1700	0013841					
The enclosed Articles of Dissolut	ion and fee are submitted for filing.					
Please return all correspondence epicerning this matter to the following:						
	supering this name to the following.					
Joseph H. Brown, Esq.	;					
(1	Vaine of Contact Person)					
Blount Law, PL						
	(Firm/Company)					
809 Walkerbilt Road, Suite 6						
	(Address)					
Naples, FL 34110						
	City/State and Zip Code)					
For further information concerning	this matter, please call:					
Joseph H. Brown	at (²³⁹⁻⁵⁹²⁻⁴⁸¹⁵					
(Name of Contact Perso	(Area Code) (Daytime Telephone Number)					
Enclosed is a check for the followi	ng amount:					
■ \$35 Filing Fee □ \$43.75 Filing Certificate of	Fee & \$\sumsymbol{\text{\$\subset}}\$\$\$ \$\$43.75\$ Filing Fee & \$\sumsymbol{\text{\$\subset\$}}\$\$\$\$\$ \$\$52.50\$ Filing Fee, \$\$\$Certificate of Status & \$\$\$Certified Copy & \$\$\$Certified Copy & \$\$\$enclosed\$\$\$\$\$\$\$\$\$\$\$\$\$\$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					

ARTICLES OF DISSOLUTION

FIRST:	The name of the corporation as currently filed with the Florida Department of State:		
	Dries Teamwork Corporation		
SECOND:	The document number of the corporation (if known): P17000013841		
THIRD:	The date dissolution was authorized:		
	Effective date of dissolution if applicable:		
	(no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date with not be listed as the document's effective date on the Department of State's records.	ill	
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.	1	
	Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:		
	The number of votes cast for dissolution was sufficient for approval by	. 18	
) FEB	
	(voting group)	3 -5	
	·		
S	Signature:	41 :4 Hd	
	(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)		
	KEGINA DRIES		
	(Typed or printed name of person signing)		
•	(Title of person signing)		

Filing Fee: \$35

Notice of Corporate Dissolution

	1	
This notice is submitted by the dissolved c against this corporation as provided in s. 6	оп 07.	poration named below for resolution of payment of unknown claims 1407, F.S.
This "Notice of Corporate Dissolution" is	οp	tional and is not required when filing a voluntary dissolution.
Name of Corporation:Dries Teamwork Corp	ora 	tion
Date of dissolution will be the date the diss specified in the Articles of Dissolution.	oli	ution is filed with the Department of State or as
Description of information that must be inc	lu	ded in a claim:
Name, address, telephone number, account refu	rei	nce number, and amount claimed.
		
	<u> </u>	
Mailing address where claims can be sent:	(C)	aims cannot be sent to the Division of Corporations)
Blount Law, PL		
809 Walkerbilt Road, Suite 6		
Naples, FL 34110		
A claim against the above named corporativithin 4 years after the filing of this notice.	on,	will be barred unless a proceeding to enforce the claim is commenced
REGINA DRI	 	s la One,
Printed Name of the Person Fi	ling	, Signature of the Posson Filing

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