P18 0000 14987

Office Use Only



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COVER LETTER

TO: Amendment Section

Division of Corporations

•		
SUBJECT: Voluntary di	solution	
DOCUMENT NUMBER: P18000	014987	
The enclosed Articles of Dissolution and fe	ee are submitted for filing	g
Please return all correspondence concerning	this matter to the follow	ving:
Claire M. McGraw)	
(Name of C	Contact Person)	
Maxwell Groves Stor	ye, nc n/Company)	
200 N. Lotela A	Ve	
Avon Park, Fl 33:	×2.5	
(City/Stat	te and Zip Code)	
For further information concerning this mat		
Claire M. McGraw (Name of Contact Person)	at (<u>\$63~43</u> (Area Code)	39 - 4839 (Daytime Telephone Number)
Enclosed is a check for the following amount	,	,
Enclosed is a check for the following amount	•••	
□ \$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	Ame Divis The (2415	et Address: Indment Section Ission of Corporations Centre of Tallahassee Indicate the N. Monroe Street, Suite 810 Ishassee, 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:			
	Maxwell Groves Store, Inc			
SECOND:	The document number of the corporation (if known): P1800014987			
THIRD:	The date dissolution was authorized: 9-25-20			
	Effective date of dissolution if applicable:			
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.			
	Signature: M.			
	Claire M. McGraw (Typed or printed name of person signing)			
	President			

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	uțion.
Name of Corporation: Maxwell Groves Store Inc.	
The above named corporation is the subject of dissolution and the effective date of a dissolution is:	
9-25-20 (date filed with the Dept. if date specified in the Articles of Dissolution)	
Description of information that must be included in a claim:	
Dissolution for personal reasons	
Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporate Claire M. McGvaw 196 Paradise Island Dr. Haines City, FL 33844	
A claim against the above named corporation will be barred unless a proceeding to enforce the claim within 4 years after the filing of this notice.	is commenced