

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

10: Amenament Section	
Division of Corporations	70
	The state of the s
SUBJECT: Dissolution of business	
	3
P18000096728	,
DOCUMENT NUMBER:	
The enclosed Articles of Dissolution and fee are submi	itted for filing.
Please return all correspondence concerning this matter	to the following:
James Allen Stillwagon II	
(Name of Contact Pers	son)
· ·	,
Spot-Off/Spot-On Mobile Detailing	
(Firm/Company)	
6130 Shasta St.	
(Address)	
Englewood, Florida 34224	
(City/State and Zip C	Code)
For further information concerning this matter, please of	caii:
94	1 786-4279
at (
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 F	Filing Fee & 🚨 \$52.50 Filing Fee.
Certificate of Status Certified	5
N1 .	al copy is Certified Copy
ë enclosed	
	enclosed)
enclosed MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building 2661 Executive Center Circle
🛱 Tallahassee, FL 32314	Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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: Spot-Off/Spot-On		
SECOND:	The document number of the corporation (if known):		
THIRD:	The file date of the articles of incorporation:		
FOURTH:	(CHECK AT LEAST ONE BOX)		
	☐ None of the corporation's shares have been issued.		
	The corporation has not commenced business.		
FIFTH:	No debt of the corporation remains unpaid.		
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.		
SEVENTH	Adoption of Dissolution (CHECK ONE)		
	A majority of the incorporators authorized the dissolution.		
	☐ A majority of the directors authorized the dissolution.		
Sign	ature: James Allen Stitteren Fl		
	(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.)		
	James Allen Stillwagon II		
	(Typed or printed name of person signing)		
	Vice President		
	(Title of Person Signing)		

Filing Fee: S35

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: Spot-off/Spot-on Corp Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Business was never commenced. Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 6130 Shasta St 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. Signature of the Person Filing James Alla Stillwagen #F
Printed Name of the Person Filing

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