P19000033951

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Supplied Instructions to	- Cilian Officer	
Special Instructions to Filing Officer:		
	Q. SILAS	
	Std 13 2021	

Office Use Only



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11/22/21--01013--003 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: AEROSPACE DELIVERY, INC.		
DOCUMENT NUMBER: P19000023951		
The enclosed Articles of Dissolution and for	ee are submitted for filing	
Please return all correspondence concerning	g this matter to the followi	ng:
BRENDAN CAMPBELL		
(Name of 0	Contact Person)	
Aerospace Delivery, Inc.		
(Firm	n/Company)	
7455 West 2nd Ct.		
(Ac	ddress)	
Hiafeah, Fl 33014		
(City/Stat	te and Zip Code)	
For further information concerning this mat	ter, please call:	
Brendan Campbell	786-559-7828 at (
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount	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

FILED

ARTICLES OF DISSOLUTION

2021 NOV 22 PH 4: 17

SECRETARY OF STATE
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: Aerospace Delivery, Inc.
SECOND:	The document number of the corporation (if known):
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 will 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) BRENDAN CAMPBELL
	(Typed or printed name of person signing)
	PRESIDENT
	(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:____AEROSPACE DELIVERY, INC. The above named corporation is the subject of dissolution and the effective date of a dissolution is: DECEMBER 31, 2021. (date filed with the Dept. if date specified in the Articles of Dissolution) Description of information that must be included in a claim: NAME, ADDRESS, PHONE NUMBER, & EMAIL ADDRESS. DESCRIPTION OF CLAIM & ORIGINATION DATE OF CLAIM. DOCUMENTATION SUPPORTING CLAIM. Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations) **BRENDAN CAMPBELL** 7455 w. 2ND COURT HIALEAH, FL 33014 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. **BRENDAN CAMPBELL**

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

Printed Name of the Person Filing