

To: 8506176380

From: 9419542128

11/20/2024 4:48:24 PM

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Division of Corporations

019 0000 32116

Florida Department of State
Division of Corporations
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Division of Corporations
Fax Number : (850)617-6380

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From:

Account Name : NORTON, HAMMERSLEY, LOPEZ & SKOKOS, P.A.
Account Number : 120010000202
Phone : (941)954-4691
Fax Number : (941)954-2128

2024 NOV 20 AM 10:34
STATE OF FLORIDA
TALLAHASSEE, FL

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DISSOLUTION OR WITHDRAWAL
BOLERO HOME DECOR, INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

CORPORATION@NHLSLAW.COM

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H240003859883

**ARTICLES OF DISSOLUTION
OF
BOLERO HOME DECOR, INC.**

Pursuant to Section 607.1403, Florida Statutes, BOLERO HOME DECOR, INC., a Florida profit corporation, hereby adopts the following Articles of Dissolution:

ARTICLE I - NAME

The name of this Corporation is:

BOLERO HOME DECOR, INC.

ARTICLE II - DOCUMENT NUMBER

The document number of the corporation is: P19000032116.

ARTICLE III - DATE OF INCORPORATION

The file date of the articles of incorporation was April 9, 2019.

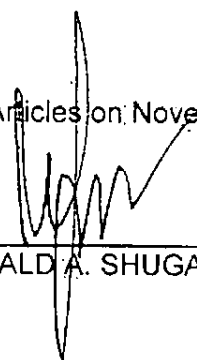
ARTICLE IV - DATE DISSOLUTION AUTHORIZED

The date the dissolution was authorized was November 20, 2024. The dissolution is to be effective on the date that these Articles are filed and accepted.

ARTICLE V - APPROVAL

The dissolution was approved by the shareholders. The number of votes cast by the shareholders was sufficient for approval.

The undersigned has executed these Articles on November 20, 2024.



RONALD A. SHUGAR, President

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CLERK OF STATE
TALLAHASSEE, FL

H24000385 9883

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: BOLERO HOME DECOR, INC.

Document number of Corporation is: P19000032116.

Date of dissolution was: The date Articles of Dissolution were filed and accepted by the Department.

Description of information that must be included in a written claim:

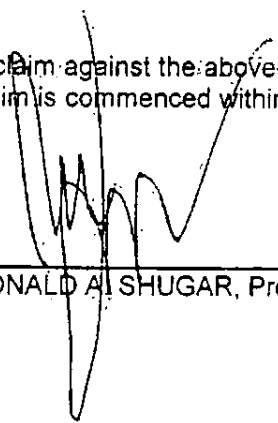
The name, mailing address, email address, and phone number of the claimant.

The amount of any such alleged claim.

The character of any such alleged claim (e.g. matured; secured; contingent; conditional; unmatured).

Mailing address where claims can be sent: P.O. Box 3676
Sarasota, FL 34230
Attn: Ronald A. Shugar

A claim against the above-named Corporation will be barred, unless a proceeding to enforce the claim is commenced within four (4) years after the filing of this notice.


RONALD A. SHUGAR, President

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CLERK OF DISTRICT COURT
TALLAHASSEE, FL