P190000 40182

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SECRETARY ON STATE
TALLAHASSEN FL

OCT 10 2020

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: COPPORATION DISSOLUTION	
DOCUMENT NUMBER: <u>P19000040182</u>	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
LYUDMILA ANDE (Name of Contact Person)	
(Name of Contact Person)	
MIW AND TODAY INC (Firm/Company)	
1600 TAFT ST #418 (Address)	
HOLLYWOOD FL 33020 (City/State and Zip Code)	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
LYUDMILA ANDE at (754) 210-157 (Name of Contact Person) (Area Code) (Daytime Teleph	none Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & \$\Bigcup \$43.75 Filing Fee & \$\Bigcup \$52.50 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) \$\Bigcup \$43.75 Filing Fee & \$\Bigcup \$52.50 Filing Fee & Certificate of Certificate of Certificate of Certificate of Certified Copy (Additional coepies)	Status & y
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahaTallahassee, FL 323142415 N. Monroe Street	ssee

Tallahassee, 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:
	NOW AND TODAY INC
SECOND:	The document number of the corporation (if known): 19000040182
THIRD:	The date dissolution was authorized: $\frac{8/17/2020}{}$
	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.
5	Signature: Maching Hotel (By a director, prosident 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) L 7 U D M I L A AND E (Typed or printed name of person signing)
	REGISTEREN AGENT (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: NOW AND TODAY The above named corporation is the subject of dissolution and the effective date of a dissolution is: $\frac{8}{18}$ $\frac{20}{20}$ (date filed with the Dept. if date specified in the Articles of Dissolution) Description of information that must be included in a claim: DECISION BY OWNER Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations) 1600 TAFT ST # 418 HOLLYWOOD FL 33020 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.

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

Signature of the Person Filing

LYUDMILA ANDE

Printed Name of the Person Filing