P19000081124

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236 East 6th Avenue. Tallahassee, Florida 32303 P:O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT:	
DOCUMENT NUMBER:	
The enclosed Articles of Dissolution and t	fee are submitted for filing.
Please return all correspondence concernin	ig this matter to the following:
ANNA STANISLAVSKY	
(Name of	Contact Person)
(Fin	m/Company)
18:	555 COLLINS AVE APT 1001
(A	Address)
SUNNY ISLES, FL 33160	
(City/St	ate and Zip Code)
For further information concerning this ma	atter, please call:
MAKSIM ROZENFELD	at (718-986-9436
(Name of Contact Person)	(Area Code) (Daytime Telephone Number
Enclosed is a check for the following amo	unt:
LX\$35 Fiting Fee	Certified Copy (Additional copy is enclosed) \$\sum_{\begin{subarray}{l} \\$52.50 \\ \\$52.50 \\ \\$51ting 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 Tallahassec 2415 N. Monroe Street, Suite 810 Tallahassec, FL 32303

2023 JAN 25 AM 10: 41

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:
	ALLTHINGSPORSCHES INC
SECOND:	The document number of the corporation (if known): P19000081124
THIRD:	The date dissolution was authorized: 1/20/23
	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.
	A the whole
	Signature: (By a director, president or other officer - if directors or officers have not been selected, by an incomporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	ANNA STANISLAVSKY
	(1) ped or printed name of person signing)
	PRESIDENT

Filing Fee: \$35

(l'ale of person signing)