# P19000084342

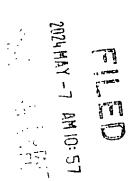
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
·
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
<u> </u>

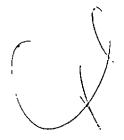
Office Use Only



900429185179

05/07/24--01026--001 \*\*35.00





# **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: The P	alm Beach Fashion Week Inc			
DOCUMENT NU	JMBER: P190000084342			
The enclosed Arti	icles of Dissolution and f	ce are submitted for filing	<u>1</u> .	
Please return all co	orrespondence concerning	$\underline{2}$ this matter to the follow	ing:	
Olympia Devine				
	(Name of	Contact Person)	· · ·	
The Palm Beach Fash	nion Week Inc			
·	(Firm	n/Company)	25	
P.O. Box 481			2024 HAY	T]
	(A)	ddress)	1	A PERSONAL PROPERTY OF THE PERSON NAMED IN COLUMN TO THE PERSON NA
Palm Beach FL 3348	0		. <u> </u>	
	(City/Sta	te and Zip Code)	AH 10. 5	
For further inform	nation concerning this man	ter, please cali:	. পূ প্র	
Olympia Devine		at (561) 420 9143		
(Name)	of Contact Person)	(Area Code)	(Daytime Telephone Number)	)
Enclosed is a chec	k for the following amou	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 Addre	Mailing Address: Street Address:		t Addrose:	

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

## 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:  The Palm Beach Fashion Week Inc
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized:
	Effective date of dissolution if applicable:  (Po more than 90 days after dissolution file date)
	(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, resident r 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)
	Olympia Devine
	(Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35