

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000127780 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : MILAM HOWARD, ET.AL.

Account Number : I20000000206 Phone : (904)357-3660

Fax Number : (904)357-3661

DISSOLUTION OR WITHDRAWAL WB2020TLH INC

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

Electronic Filing Menu

Corporate Filing Menu

Help

T | T

158 8 14

P.O. Box 6327

Tallahassee, FL 32314

COVER LETTER

Division of Corporations	
SUBJECT: WB2020TLH INC	
DOCUMENT NUMBER: P190000867	31
The enclosed Articles of Dissolution and f	ee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Robert G. Shaffer, II, Esq.	
(Name of	Contact Person)
Milam Howard Nicandri & Gilla	m, P.A.
(Firm	n/Company)
14 East Bay Street	
(A	ddress)
Jacksonville, FL 32202	
(City/Sta	ite and Zip Code)
For further information concerning this ma	tter, please call:
Heather Durham	at (_904) 357-3660
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amou	int:
	☐ \$43.75 Filing Fee & ☐ \$52.50 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	Street Address: Amendment Section Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

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:
	WB2020TLH INC
SECOND:	The document number of the corporation (if known): P19000086731
THIRD:	The date dissolution was authorized: March 13, 2024
	Effective date of dissolution if applicable: March 13, 2024
	(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 unanimously approved by the Directors pursuant to the By-laws 7 7 7 8 8 10:56
S	ignature: (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 fiduciary, by that fiduciary)
_	Kimberly Tocci
	(Typed or printed name of person signing)
_	Vice President
_	(Title of nerson 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: WB2020TLH INC The above named corporation is the subject of dissolution and the effective date of a dissolution is: (date filed with the Dept. if date specified in the Articles of Dissolution) Description of information that must be included in a claim: Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations) Mr. Sean Githens, 9171 Old Chemoine Road, Tallahassee, FL 32309 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. Kimberly Tocci, Vice President Signature of the Person Filing Printed Name of the Person Filing

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