

P20 0000 22543

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

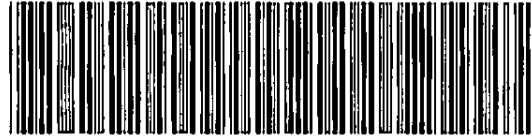
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

notice 4402

Office Use Only



300359847533

02/16/21--01018--003 \*\*35.00

FILED

2021 MAY -7 PM 3:25

SECRETARY OF STATE  
TALLAHASSEE, FL

Dissolution  
w/ notice

JUN 08 2021

D CUSHING

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Articles of Dissolution

**DOCUMENT NUMBER:** for P20000022543

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Anita Paoli, Esq.

(Name of Contact Person)

The Law Offices of A. Paoli, P.A.

(Firm/Company)

1720 Harrison Street, Suite 8-C

(Address)

Hollywood, FL 33020-6828

(City/State and Zip Code)

2021 MAY -7 PM 3:25  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

For further information concerning this matter, please call:

Anita Paoli, Esq.

(954) 924 - 8441

at (

(Name of Contact Person)

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$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 Address:**

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

***THE LAW OFFICES OF A. PAOLI, P.A.***

1720 HARRISON STREET, SUITE 8C

HOLLYWOOD, FLORIDA 33020-6828

TELEPHONE: (954) 924-8441

TELEFAX: (954) 920-6356

ANITA PAOLI, ESQ.

EMAIL: AnitaPaoliLaw@apaolilaw.com

HTTP://WWW.APAOLILAW.COM

By U.S. Mail - Certified - Return Receipt Requested

May 3, 2021

Our File No. 4285-02/ Smith - Terra Firma

Diane Cushing  
Florida Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Attn: DIANE CUSHING

RE: Division of Corporations reference number P20000022543 and letter Number 021A00007612

Dear Ms. Cushing,

Enclosed, please find the completed Notice of Corporate Dissolution for the Dissolution of Terra Firma Risk Management, Inc. and a copy of your letter dated April 13, 2021. The claim information section has been completed on the Notice pursuant to your instructions. Please send verification of the dissolution to The Law Offices of A. Paoli, P. A., 1720 Harrison Street, Suite 8-C, Hollywood, FL 33021-6828.

Yours truly,

THE LAW OFFICES OF A. PAOLI, P.A.



ANITA PAOLI, ESQ.  
For the Firm

RECEIVED  
2021 MAY -7 PM 12:40  
STREET 1720  
TALLAHASSEE, FL 32314

## 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:

Terra Firma Risk Management, Inc.

SECOND: The document number of the corporation (if known): P20000022543

THIRD: The date dissolution was authorized: 12/23/2020

Effective date of dissolution if applicable: 12/23/2020

(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.

FILED  
2021 MAY -7 PM 3:25  
SECRETARY OF STATE  
TALLAHASSEE, FL

Signature: 

(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)

James Smith

(Typed or printed name of person signing)

President

(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: Terra Firma Risk Management, Inc.

The above named corporation is the subject of dissolution and the effective date of a dissolution is: 12/23/2020

(date filed with the Dept. if date specified in the Articles of Dissolution)

Description of information that must be included in a claim:

All claims must include the full contact information, including the relationship with Terra Firma Risk Management, Inc., including the person/persons and any corporate entity who contracted with Terra Firma Risk

Management, Inc. and the services that were provided. Copies of any invoices need to be submitted as well.

Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations)

Jim Smith

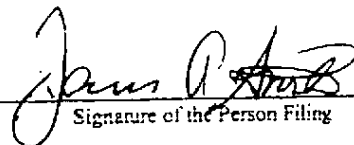
1620 S. Ocean Blvd., Apt 2A

Fort Lauderdale By The Sea, FL 33062-7702

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.

James Smith

Printed Name of the Person Filing

  
Signature of the Person Filing

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