

P21000019586

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

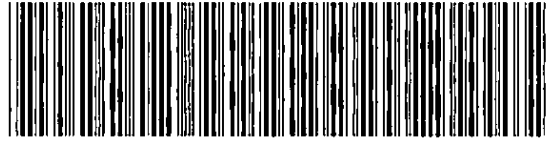
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/18/24--01017--019 **55.00

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2024 DEC -2 11 4:56

SECRETARY OF STATE
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 5, 2024

JOHN BAILEY
2033 HICKORY BROOK DR
HERMITAGE, TN 37076

SUBJECT: WHITE CROW YOGA COMPANY
Ref. Number: P21000019586

We have received your document for WHITE CROW YOGA COMPANY and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA LLC, but your entity is a PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

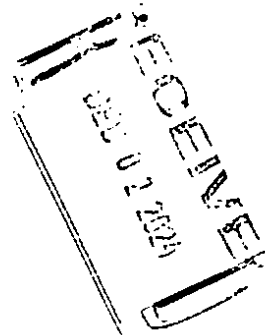
If you have any questions concerning the filing of your document, please call (850) 245-6050.

SHANTELL BROWN
Regulatory Specialist II

Letter Number: 624A00024911

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SECRETARY OF STATE
TALLAHASSEE, FL

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WHITE CROW YOGA COMPANY

DOCUMENT NUMBER: P21000019586

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

Please return all correspondence concerning this matter to the following:

JOHN P. BAILEY
(Name of Contact Person)

WHITE CROW YOGA COMPANY
(Firm/Company)

2033 HICKORY BROOK DR
(Address)

HERMITAGE, TN 37076
(City/State and Zip Code)

For further information concerning this matter, please call:

John Bailey at (615) 630-9409
(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)

*PREVIOUSLY submitted and
DEPOSITED in OCTOBER ... \$55.00*

JPB

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

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:

WHITE CROW YOGA COMPANY

SECOND: The document number of the corporation (if known): P21000019586

THIRD: The date dissolution was authorized: OCT 22, 2024

11

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.

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SECRETARY OF STATE
TALLAHASSEE, FL

Signature: John P. Bailey

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - or in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

JOHN P. BAILEY

(Typed or printed name of person signing)

SECRETARY

(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: WHITE CROW YOGA COMPANY

The above named corporation is the subject of dissolution and the effective date of a dissolution is: _____

OCT 22, 2024

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

Description of information that must be included in a claim:

The Company is NO LONGER conducting
business in the state of Florida and
has relocated out of state

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

2033 Hickory Brook DR
HERMITAGE, TN 37076

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SECRETARY OF STATE
TALLAHASSEE, FL

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.

JOHN P. BAILEY

Printed Name of the Person Filing

John Bailey

Signature of the Person Filing

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