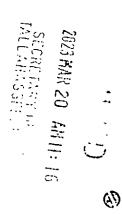
P21000023662

(Red	questor's Name)	
(Ado	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	
	J. HORN JUN 2 0 20	1E 123

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: SOTO FOUR TRADING CORP		
DOCUMENT NUMBER: P21000023662		
The enclosed Articles of Dissolution and fee	are submitted for filing.	
Please return all correspondence concerning the	his matter to the followi	ng:
Claudette Hollenback		
(Name of Co	ontact Person)	
(Firm/C	Company)	
13402 Copperhead Drive		
(Add	ress)	
Riverview, FL 33569		
(City/State	and Zip Code)	
For further information concerning this matter	r, please call:	
Claudette Hollenback	at (⁷²⁷⁻³⁶⁵⁻²⁰¹²	
(Name of Contact Person)	 ··· \ 	Daytime Telephone Number)
Enclosed is a check for the following amount:	:	
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)

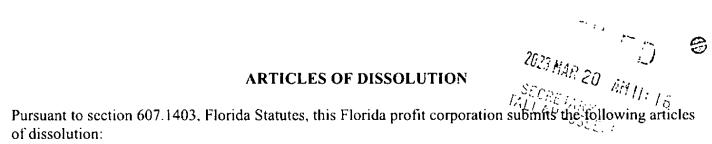
Mailing Address:

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





FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	SOTO FOUR TRADING CORP
SECOND:	The document number of the corporation (if known): P21000023662
THIRD:	The date dissolution was authorized: 3/1/2023
	Effective date of dissolution if applicable: 3/1/2023
	(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: CHollewoolf
	(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)
	Claudette Hollenback
	(Typed or printed name of person signing)
	Secretary/VP
	(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: SOTO FOUR TRADING CORP The above named corporation is the subject of dissolution and the effective date of a dissolution is: 3/1/2023 (date filed with the Dept. if date specified in the Articles of Dissolution) Description of information that must be included in a claim: Name of Claimant; address, email & telephone; description and value of claim Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations) 13402 Copperhead Drive, Riverview, FL 33569 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. Printed Name of the Person Filing