# P21000065902

(Requestor's Name)
(Address)
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dessolution with notice 09/21/21-01030-003 \*\*43.75

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# **COVER LETTER**

TO: Amendment Division of	nt Section f Corporations		•
	ion of Design Group Expo S		
DOCUMENT NUM	MBER: P21000065902		
The enclosed Articl	es of Dissolution and for	ee are submitted for filing	<u>.</u>
Please return all cor	respondence concerning	g this matter to the follow	ing:
Shannon Stahlin			
	(Name of (	Contact Person)	
Direct Incorp			
	(Firm	n/Company)	
PO Box 7089			
	(Ac	ddress)	
Ann Arbor, MI 48107			
	(City/Star	te and Zip Code)	
For further informat	ion concerning this mat	ter, please call:	
Shannon Stahlin		at (at (	
(Name of	Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check	for the following amou	nt:	
□ \$35 Filing Fee [	☐ S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address	•	Stroot	t Addross:

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

FILED

# ARTICLES OF DISSOLUTION

2021 SEP 21 PM 12 27

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles

FIRST:	The name of the corporation as currently filed with the Florida Department of State:  Design Group Expo Services Corp.			
SECOND:	The document number of the corporation (if known): P21000065902			
ΓHIRD:	The date dissolution was authorized: 08/11/2021			
	Effective date of dissolution <u>if applicable:</u> (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, 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)			
	Samantha Hagen			
	(Typed or printed name of person signing)			
	Director			
	(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. Design Group Expo Services Corp. Name of Corporation: The above named corporation is the subject of dissolution and the effective date of a dissolution is: 08/11/2021 (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) 13524 Lodi Ter Apt 6303 Windermere FL, 34786 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. Samantha Hagen Samantha Hagen 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