

FILED
Jul 20, 2023
Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:
ACME BAR AND RESTAURANT CORP

SECOND: The document number of the corporation: P22000005739

THIRD: The file date of the articles of incorporation: January 13, 2022

FOURTH: None of the corporation's shares have been issued.

FIFTH: No debt of the corporation remains unpaid.

SIXTH: The net assets of the corporation remaining after winding up, if any, have been distributed.

SEVENTH: A majority of the incorporators or directors authorized the dissolution.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: TIM MURRAY PRESIDENT

Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative

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.

Name of Corporation:

ACME BAR AND RESTAURANT CORP

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

THE CORPORATION ACME BAR AND RESTAURANT CORP WAS SET UP IN 2022. THE BUSINESS FAILED TO HAPPEN DUE TO PARTNER DIFFERENCES. THERE WAS NEVER ANY EMPLOYEES. THERE WAS NEVER A BANK ACCOUNT SET UP. THE COMPANY NEVER HAD ANY SALES AT ALL. THIS ACCOUNT

Mailing address where claims can be sent:

1020 ROBIN LANE
WINTER HAVEN, FL 33884

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.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: TIM MURRAY

Electronic Signature of the Person Filing