P22000092027

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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ecial Instructions to Filing Officer:			
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Disse	olution of Corp	oration		<u> </u>	
DOCUMENT NU	JMBER: P	22000092027			
The enclosed Articles of Dissolution and fee are submitted for filing.					
Please return all co	orrespondenc	ce concerning	g this matter to the follow	ing:	
Charles Beninati					
		(Name of	Contact Person)		
C-6 of Florida Inc.					
<u> </u>		(Firm	n/Company)		
5686 Dunridge Dr.					
		(A	ddress)		
Pace / Florida 32571					
(City/State and Zip Code)					
For further inform	ation concer	ning this ma	tter, please call:		
Charles Beninati			at (720) 301	-9242	
(Name	of Contact Po	erson)	(Area Code &	Daytime Telephone Number)	
Enclosed is a check for the following amount:					
■ \$35 Filing Fee		Filing Fee & e 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 Addre	·66.		Street Address:		

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 FILED

suant to section 607.1401. Florida Statutes, this Florida profit corporation with his Rive to 180vi					
cles of di	ssolution: SECRETARY OF STATE TALLAHASSEE, FL				
RST:	The name of the corporation as currently filed with the Florida Department of State:				
	C-6 of Florida Inc.				
COND:	The document number of the corporation (if known): P22000092027				
HRD:	The file date of the articles of incorporation: 12/02/2022				
OURTH:	: None of the corporation's shares have been issued.				
FTH:	No debt of the corporation remains unpaid.				
.XTH:	The net assets of the corporation remaining after winding up, if any, have been distributed to the shareholders, if shares were issued.				
EVENTH:	A majority of the incorporators or directors authorized the dissolution.				
Signature: Mules Bennist. (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.)				
	Charles Beninati (Typed or printed name of person signing)				
	(Typed of printed name of person signing)				
	President				

Filing Fee: \$35

(Title of Person Signing)

Notice of Corporate Dissolution

ainst this corporation as provided in s. 607.1407, F.S.	w for resolution of payment of unknown claims
nis "Notice of Corporate Dissolution" is optional and is not req	uired when filing a voluntary dissolution.
ame of Corporation: C-6 of Florida Inc.	
ne above named corporation is the subject of dissolution and the	e effective date of a dissolution is: 12/31/2024
(date filed with the Dept, if date specified	l in the Articles of Dissolution)
escription of information that must be included in a claim:	
//A	
failing address where written claims can be sent: (Claims canno	t be sent to the Division of Corporations)
686 Dunridge Dr., Pace FL 32571	
claim against the above named corporation will be barred unle	ss a proceeding to enforce the claim is commenced
ithin 4 years after the filing of this notice.	
harles Beninati	Marches Bennats
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