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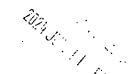
COVER LETTER

TO: Amendment Section **Division of Corporations** SUBJECT: ___ DISSOLUTION DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DOUG ZANDSTRA (Name of Contact Person) DOUG ZANDSTRA CPA (Firm/Company) 9040 TOWN CENTER PARKWAY (Address) LAKEWOOD RANCH, FL 34202 (City/State and Zip Code) For further information concerning this matter, please call: DOUG ZANDSTRA (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: ■ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy (Additional copy is (Additional copy is enclosed) enclosed) Mailing Address: **Street Address:** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



ursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following ticles of dissolution:

RST:	The name of the corporation as currently filed with the Florida Department of State: YOUSUF BRIAN E SCHULZ INC	
ECOND:	The document number of the corporation (if known):	
HIRD:	The file date of the articles of incorporation: 03/11/2024	
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: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
	(By a director, president orother officer - if directors or officers have not been selected, by an incorporator - if in the hands of a received trustee, or other court appointed fiduciary, by that fiduciary.)	
	Yousuf B E. Schulz (Typed or printed name of person signing)	
	PRESIDENT	
	(Title of Person Signing)	

Filing Fee: \$35