P2400002563

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DIRECTORIONS

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Warren Unitube Inc		
DOCUMENT NUMBER: P2410000 25663		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
(Name of Contact Person)		
(Name of Contact Person)		
(Firm/Company)		
52(c6 Lamette St (Address)		
6rlando FL 3281 (City/State and Zip Code)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Contact Person) at ((&4) 256 9346 (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)		
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:		
	Warren Unilone Inc		
SECOND:	The document number of the corporation (if known): ρ 24 0000 25663		
THIRD:	The file date of the articles of incorporation: 4/12/24		
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 to the shareholders, if shares were issued.		
SEVENTH:	A majority of the incorporators or directors authorized the dissolution.		
Signa	ature:) ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		
	(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.)		
	(Typed or printed name of person signing)		
	(Typed or printed name of person signing)		
	(Title of Person Signary)		
	(Typed or printed name of person signing) PR APR 19 PH 12: 17 Filling Fee: \$35		