P94000074434

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
-
Special Instructions to Filing Officer:
Openiar materials to raining amount
Q. SILAS
ษะเที 3.5 2021

Office Use Only



900375831369

11/01/21--01013--007 **35.00

2021 NOV -1 PH 3: 00

COVER LETTER

TO: Amendment Section	
Division of Corporations	
SUBJECT: WITHERS BENEFIT CONSULTAN	TS, INC.
DOCUMENT NUMBER: P94000074434	<u> </u>
The enclosed Articles of Dissolution and fe	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
THOMAS WITHERS	
(Name of C	Contact Person)
WITHERS BENEFIT CONSULTANTS, INC.	
(Firm	/Company)
1650 KELVINGTON BLVD.	
(Ad	dress)
GALLATIN, TN 37066	
(City/Stat	e and Zip Code)
For further information concerning this matt	er, please call:
STELLA PIERSALL, CPA	at ((352) 567-2020
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amour	nt:
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) ☐ \$43.75 Filing Fee & Certificate of Status & Certified Copy (Additional copy is enclosed)

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee

2021 NOV -1 PH 3: 00

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, 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: WITHERS BENEFIT CONSULTANTS, INC.	
SECOND:	The document number of the corporation (if known):	
THIRD:	The date dissolution was authorized:	
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)	
	(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: Homes Without	
	(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)	
	THOMAS WITHERS	
	(Typed or printed name of person signing)	

(Title of person signing)

PRESIDENT