P94000092977

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<u>COVER LETTER</u>

TO: Amendment Section Division of Corporations
SUBJECT: Dissolution of CAMCAD Technologies, Line
DOCUMENT NUMBER: 4 940000 92977
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Alison W. MKillop (Name of Contact Person)
(Name of Contact Person)
(Firm/Company) (// 2) / RaG G G Glada Place
(Address)
(Address) (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Alison McKillop at (407 231-5186 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\sum \\$43.75 Filing Fee & \$\sum \\$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) 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 Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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:		
	CAMCAD Technologies, Inc.		
SECOND:	The document number of the corporation (if known): P940000 92977		
THIRD:	The date dissolution was authorized: 12-15-2023		
	(no more than 90 days after dissolution be listed as the document's effective date on the Department of State's records	solution file date) equirements, this date will	
FOURTH: Dissolution was approved by the shareholders, in the manner required by this chapter the articles of incorporation.			
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	Signature: alison W. M. Killop	: ? &	
(By a director, president or other officer - if directors or officers have not been selected, by incomporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by induciary.			
	Alison W. MCKillop (Typed or printed name of person signing)		
	(Title of person signing)		

Filing Fee: \$35