P9500009689a

(Re	equestor's Name)	
(Ad	dress)	
. (Ad	ldress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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10 JUL 30 PM 1: 36 SECRETARY OF STATE

FILED FILE



COVER LETTER

Division of Corporations
SUBJECT: Dissolution of Corporation
DOCUMENT NUMBER: <u>P95000096292</u>
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Bettina Tweddle
(Name of Contact Person)
(Firm/Company)
12525. Military To # 142-1 (Address)
Deerfield Boh, H 3344) (City/State and Zip Code)
For further information concerning this matter, please call:
Bettina Tweddle at (754) DU5-5913 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigs\\$43.75 Filing Fee & \$\bigs\\$43.75 Filing Fee & \$\bigs\\$52.50 Filing Fee, \$\bigs\\$Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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:	
•	W7L, INC.	
SECOND:	The document number of the corporation (if known): P950000 962.93	
THIRD:	The date dissolution was authorized: 5/10/10	
• •	Effective date of dissolution if applicable: 2/10/10 (no more than 90 days after dissolution file date)	
FOURTH:	Adoption of Dissolution (CHECK ONE)	
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.	
	Dissolution was approved by the shareholders through voting groups.	
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:	
	The number of votes cast for dissolution was sufficient for approval by	
	Betting Tweddle (Sole Shareholder)	315
	Signature: (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)	
	Bettina Tweddle (Typed or printed name of person signing)	
	(Typed or printed name of person signing) President (Title of person signing)	

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

ins "Nonce of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.
Name of Corporation: WFL TNC
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.
Description of information that must be included in a claim:
Moneys Owed, Contact Information
Moneys Owed, Contact Information
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 12525 Milltan, Tai #1421 Deer field Boh, H 33442
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced
within 4 years after the filing of this notice.
Restratuedale 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