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## **COVER LETTER**

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations
SUBJECT: C. SCOTT NOTLL, P. 4.
DOCUMENT NUMBER: PG5, 0000 97344
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)
(Firm/Company)
7600 VINTAGE WAY
PORT IT. LINGE, HE 34986 FE 80 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
SCOTT NALL at 172 607 3670
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
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 (Additional copy is enclosed) (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

## 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:
	C Scott NALL P.A.
SECOND:	The document number of the corporation (if known): 7 45 0000 973 44
THIRD:	The date dissolution was authorized: $13/31/2023$
	Effective date of dissolution <u>if applicable</u> :  (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:  (By a director, president or other officer - if directors or officers have not been selected, by an incorporation - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)  (Typed or printed name of person signing)
	(Title of person signing)

Filing Fee: \$35