P9600004383

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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DEC 2.7 2016

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Sunbiz E-file Account Deposit Slip

☐Please check this box and highlight any changes that you made to information below.					⊃ (<u>~</u> o∕∩		
Check Number: 4049					- 35 		_
Sunbiz E-file Acc	ount Number: <u>12016000</u>	00102					_
Account Name:	Prince CPA Group						_
Mailing Address:	9161 Narcoossee Roa	ad					
	Suite 202						
			· · · · · ·		Stick		
City: Orlando	<u> </u>	State:	FL	Zip: <u>32</u> 8	27	C 27	
Phone: (<u>407</u>)	823 - 8230		Fax: (407) 823	8233		PM &	
Contact Person:	Anne Herstol					: 05	_
Signature:			. = .			<u>,</u>	_

*****Note****

Make checks payable to: Florida Department of State

Each check submitted for deposit must be a minimum of \$300.

Checks must be from the Sunbiz E-File Account Holder (no 3rd party checks).

A Sunbiz E-File Account deposit slip must accompany each check submitted.

Mailing Address
Division of Corporations
Public Access Accounts
PO Box 6327
Tallahassee, FL 32314

Courier Address
Division of Corporations
Public Access Accounts
Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301

Ann E 4

Prince CPA Droup authorizes Dept. of Con to with drawal the \$35.00 fee for thes articles of Duso Wation. In Austol

INHS71 (4/14)

December 22, 2016

Florida Department of State Division of Corporations Amendment Section P.O. Box 6327 Tallahassee, FL 32314

Attn.: Lee Yarborough

RE: Cody Talbert Distribution, Inc.

To whom it may concern:

I, Robert M. Cochran, the sole shareholder and a director of Cody Talbert Distribution, Inc. (Florida Profit Corporation, document number P96000064383), have no intention to revoke the dissolution of this corporation and I release the name Cody Talbert Distribution for a new entity filing, to be in effect as of 01/01/2017.

Sincerely,

Robert M. Cochran, Shareholder / Director

December 22, 2016

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: CORPORATE DISSOLUTION		_	
DOCUMENT NUMBER: P96000064383		_	
The enclosed Articles of Dissolution and	fee are submitted for filing.		
Please return all correspondence concerning	ng this matter to the following:		
RONAL	D J. YELLAND ARE	DEC 2	
(Name of	f Contact Person)	7 PM	The fire that
PRINCE CPA GROUP, LLC			
(Fir	m/Company)	- - - - -	
9161 NARCO	OSSEE RD, SUITE 202	Ċ,	
(/	Address)	-	
ORLA	NDO, FL 32827		
(City/St	ate and Zip Code)	-	
For further information concerning this ma	atter, please call:		
RONALD J. YELLAND	at (⁴⁰⁷⁾⁸²³⁻⁸²³⁰		
(Name of Contact Person)	(Area Code) (Daytime Telephone Nu	ımber))
Enclosed is a check for the following amo	unt:		
■ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) □ \$52.50 Filing Fee, Certificate of Status of Certified Copy (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: CODY TALBERT DISTRIBUTION, INC.						
SECOND:	The document number of the corporation (if known):						
THIRD:	The date dissolution was authorized: 12/22/2016						
	Effective date of dissolution if applicable: 12/31/2016						
	(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 that will not be listed as the document's effective date on the Department of State's records.						
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						
	(voting group)						
\$	(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)						
	ROBERT M. COCHRAN						
	(Typed or printed name of person signing)						
	SHAREHOLDER						
	(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.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: CODY TALBERT DISTRIBUTION, INC.			
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .	ECKETA LLAHA	S DEC 2	
Description of information that must be included in a claim:	SSEE.	27 PM	
NAME OF PARTY MAKING CLAIM		ŧ:	C
NATURE / DESCRIPTION OF CLAIM		05	_
AMOUNT OF CLAIM			_
			_
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporation	ıs)		
2004 WOOD CT			
UNIT C			
PLANT CITY, FL 33563			_
			_
A claim against the above named corporation will be barred unless a proceeding to enforce the c within 4 years after the filing of this notice.	laim is co	mmen	 ced
Robert M. Cochran	· ·		

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00