P97000032109

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
		į

Office Use Only



200270592682

03/16/15--01013--009 **43.75

01/2017 30/2300 JO WOISTAND 13/2017 20/230 JS 18/2 13/21/2018

21715

COVER LETTER

TQ: Amendment Section Division of Corporations
SUBJECT: DISSO /utlon of My corporation Mitchellifa
DOCUMENT NUMBER: 970000 32109
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
William D Mitchell (Name of Contact Person)
(Name of Contact Person)
(DBA)MFM CATERIAS (Firm/Company)
(Firm/Company)
950 Mooky R1 # 105 (Address)
North Fort Myens Fl 33903 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (954) 695-7691 (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) Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: STREET ADDRESS:
Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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:				
	Mitchell's Cavorite Meal, Inc				
SECOND:	The document number of the corporation (if known): P97000032109				
THIRD:	The date dissolution was authorized:				
	Effective date of dissolution if applicable: (no more than 90 days after dissolution to	file date)			
FOURTH:		r			
	Dissolution was approved by the shareholders. The number of votes cast f was sufficient for approval.	or disso	lution		
	☐ Dissolution was approved by the shareholders through voting groups.				
	The following statement must be separately provided for each voting group er to vote separately on the plan to dissolve:	ntitled			
	The number of votes cast for dissolution was sufficient for approval by	15 MAR 16	SECRE SYCUSIANO		
	(voting group)	16 AM 9:53	ARY OF STATE OF CORPORATIONS		
	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)				
	(Typed or printed name of person signing)				
	President/Owner				
	CT: d - Le				

Filing Fee: \$35