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(((H24000100360 3)))



H240001003603ABCQ

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH

Account Number : 076077001702

: (407)841-1200

Phone

Fax Number

: (407)423-1831

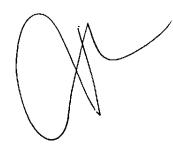
DISSOLUTION OR WITHDRAWAL J. A. BAILEY CORP.

Certificate of Status	0
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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:					
	J. A. BAILEY CORP.					
SECOND:	The document number of the corporation (if known): P97000056450					
THIRD:	The date dissolution was authorized: March 13, 2024					
	Effective date of dissolution if applicable: Upon filing	- •				
	(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 not be listed as the document's effective date on the Department of State's records.	۳ ۱				
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.	đ				
S	ignature: Breuda B. Bailey	_				
	(By a director, president or other officer - if directors or officers have for been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)					
_	Brenda B. Bailey					
	(Typed or printed name of person signing)	-				
_	President					
	(Title of person signing)	-				

Filing Fee: \$35

To:

(((H24000100360 3)))

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: J. A. BAILEY CORP.			
The above named corporation is the subject of dissolution and the	effective date of a dissol	ution is:	
Upon filing			
(date filed with the Dept. if date specified i	n the Articles of Dissolution)		702
Description of information that must be included in a claim:		TALLA	T I
Name and Address of Claimant:		HAS	5 1
Amount of Claim:		Mai.	8 0
Basis of Claim:	· · · · · · · · · · · · · · · · · · ·	72	25
Mailing address where written claims can be sent: (Claims cannot be provided in the provided i			
A claim against the above named corporation will be barred unless a within 4 years after the filing of this notice.	a proceeding to enforce t	he claim is	commenced
Brenda B. Bailey	Breuda	B.V	Baile
Printed Name of the Person Filing	Signature of the Po	erson Filing	

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