# P97000058106

| (Requestor's Name)                      |
|---|
|   |
| (Address)                               |
|   |
| (Address)                               |
| (10000)                                 |
|   |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
| (2000),000                              |
| 0.17.10.1                               |
| Certified Copies Certificates of Status |
|   |
| Special Instructions to Filing Officer: |
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Office Use Only



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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| SUBJECT: Dissolution Of Business Response C                    | Tenter Inc. Effective 3-31-2020                                     |  |
|--|---|--|
| DOCUMENT NUMBER: P97000058106                                  | <u></u>   |  |
| The enclosed Articles of Dissolution and for                   | ee are submitted for filing   | :  |
| Please return all correspondence concerning                    | g this matter to the follow   | ing:   |
| Catherine Nelson   |   |  |
| (Name of   | Contact Person)   |  |
| Business Response Center, Inc.                                 |   |  |
| (Firm  | n/Company)  |  |
| 2244 Dogwood LN NE   |   |  |
| (A   | ddress)   |  |
| Atlanta, GA 30345  |   |  |
| (City/Sta  | te and Zip Code)  |  |
| For further information concerning this mat                    | tter, please call:  |  |
| Catherine Nelson   | at ( <u>954-254-2213</u>  |  |
| (Name of Contact Person)                                       | (Area Code)   | (Daytime Telephone Number)   |
| Enclosed is a check for the following amou                     | nt:   |  |
| □ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status | ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>enclosed) |

#### **Mailing Address:**

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

#### **Street Address:**

Amendment Section
Division of Corporations
The 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:   |  |  |  |  |
|---------|--|--|--|--|--|
|         | Business Reponse Center Inc.   |  |  |  |  |
| SECOND: | The document number of the corporation (if known):   |  |  |  |  |
| THIRD:  | The date dissolution was authorized: 03-31-2020  |  |  |  |  |
|         | Effective date of dissolution if applicable:   |  |  |  |  |
|         | (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 incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) |  |  |  |  |
|         | Catherine Nelson   |  |  |  |  |
|         | (Typed or printed name of person signing)  |  |  |  |  |
|         | President, Business Reponse Center Inc.  |  |  |  |  |
|         | (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:  |
|---|
| The above named corporation is the subject of dissolution and the effective date of a dissolution is:     |
| (date filed with the Dept. if date specified in the Articles of Dissolution)                              |
| Description of information that must be included in a claim:  |
| Please include all pertanent information and discuss with Catherine Nelson @ 954-254-2213,                |
| or via email at: CATHYNELSONSOFL@BELLSOUTH.NET  |
|   |
|   |
|   |
|   |
| Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations) |
| Catherine Nelson  |
| 2244 Dogwood Ln NE  |
| Atlanta, GA 30345   |
| 954-254-2213  |
|   |

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.

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