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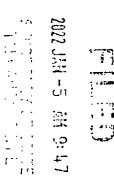
	(Requestor's Name)
	(Address)
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	(City/State/Zip/Phone #)
PICK-UI	> WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: ARTICLES OF DISSOLUTIONS
DOCUMENT NUMBER: <u>P97000080190</u>
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MICHELLE A. STRAUB
(ivalie of Collact Letson)
CLOVER SYSTEMS OF ORLANDO II INC.
(Anii Osmpun;)
2625 STANMORE CT. ORLANDO, FL 32817
(Address)
2625 STANMORE CT. DRLANDO, FL 328178 -
(City/State and Zip Code)
For further information concerning this matter, please call:
2625 STANMORE CT. DRLANDO, FL 32817 (City/State and Zip Code) For further information concerning this matter, please call: Michelle Straub at (407) 306-8877 (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 Division of Corporations
P.O. Box 6327 The Centre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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:
	CLOVER SYSTEMS OF DRLANDO IL INC.
SECOND:	The document number of the corporation (if known): P97000080190
THIRD:	The file date of the articles of incorporation: $\frac{09/16/1997}{}$
FOURTH:	None of the corporation's shares have been issued. ————————————————————————————————————
FIFTH:	No debt of the corporation remains unpaid. Thus
SIXTH:	The net assets of the corporation remaining after winding up, if any, have been distributed to the shareholders, if shares were issued.
SEVENTH:	A majority of the incorporators or directors authorized the dissolution.
Sigr	nature: Mulelle A. Straub (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 tiduciary, by that fiduciary.) Michelle A. StrauB (Typed or printed name of person signing)
	(Typed or printed name of person signing) PRESIDENT, OWNER (100%) (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: CLOVER SYSTEMS OF DRLANDO I INC. The above named corporation is the subject of dissolution and the effective date of a dissolution is: DECEMBER 30, 2021

(date filed with the Dept. if date specified in the Articles of Dissolution) Description of information that must be included in a claim: COMPANY NAME, ABDRESS, PHONE, EMAIL,

CONTACT PERSON, EXPLANATION OF CLAIM, INVOICE #, PURCHASE DROER # DATE OF EACH,
AMOUNT OF CLAIM. COPIES OF INVOICE + PURCHASE Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations) MICHELLE STRAUB 2625 STANMORE CT ORLANDO, FL 32817 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.

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

Printed Name of the Person Filing