

P97000086697

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

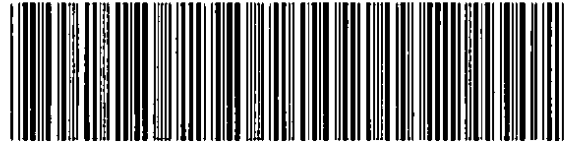
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900378374259

FILED
2021 DEC 29 AM 10:26
CLERK OF DISTRICT COURT
ALACHUA COUNTY, FL

RECEIVED
2021 DEC 29 PM 4:07
ALACHUA COUNTY, FL

Y. SULKER

JAN 01 2022

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301

850.656.7956

Fax: 850.656.7953

www.incserv.com

e-mail: accounting@incserv.com



ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau
mmoreau@incserv.com
850.656.7953

REQUEST DATE 12/29/2021

PRIORITY Regular Approval

OUR REF.# (Order ID#) 985991

ORDER ENTITY
WMR-I INC.

PLEASE PERFORM THE FOLLOWING SERVICES:

WMR-I INC. (FL)

File the attached dissolution document

NOTES:

\$35.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

A handwritten signature in black ink, appearing to be "WJ" or similar, written over a horizontal line.

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

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:

WMR-I INC.

SECOND: The document number of the corporation (if known): P97000086697

THIRD: The date dissolution was authorized: 12/28/2021

Effective date of dissolution if applicable: 12/31/2021

(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)

Stephen C. Scalione

(Typed or printed name of person signing)

Secretary

(Title of person signing)

Filing Fee: \$35

FILED
2021 DEC 29 AM 10:26
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FL