

P98000026582

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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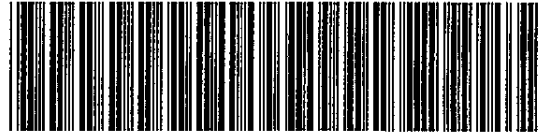
(Business Entity Name)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bardes Tax & Benefit Planning, Inc.

DOCUMENT NUMBER: P98000026582

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

David A. Bardes c/o Jan Alexander

(Name of Contact Person)

David A. Bardes Organization, Inc.

(Firm/Company)

736 22nd Place

(Address)

Vero Beach, Florida 32960

(City/State and Zip Code)

For further information concerning this matter, please call:

Jan Alexander

(Name of Contact Person)

at (772)

569-4341

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:

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

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

