

P99000043657

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

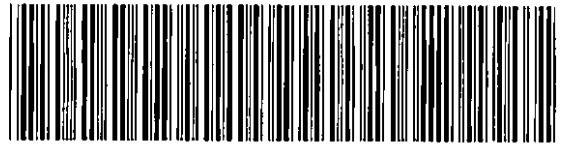
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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dissolution of
inactive corporation

2023 SEP 12 AM 8:59
CLERK OF SUPERIOR COURT
ALLAHASSEE, FLORIDA

FILED

2023 SEP 12 PM 3:32
RECEIVED
ALLAHASSEE, FLORIDA

A. RAMSEY

SEP 13 2023

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 982355 7635470

AUTHORIZATION :

COST LIMIT : \$ 35,000

ORDER DATE : September 12, 2023

ORDER TIME : 2:37 PM

ORDER NO. : 982355-010

CUSTOMER NO: 7635470

DOMESTIC FILINGS

NAME: KS BOCA, INC.

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland-sorenson - EXT#

EXAMINER'S INITIALS: _____

FILED

2023 SEP 12 AM 8:59

ARTICLES OF DISSOLUTION

DEPARTMENT OF STATE
-TALLAHASSEE, FLORIDA

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:

KS Boca, Inc.

SECOND: The document number of the corporation (if known): P99000043657

THIRD: The date dissolution was authorized: September 11, 2023

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)

John C. Nelson

(Typed or printed name of person signing)

President and Secretary

(Title of person signing)

Filing Fee: \$35