

P99 0000079761

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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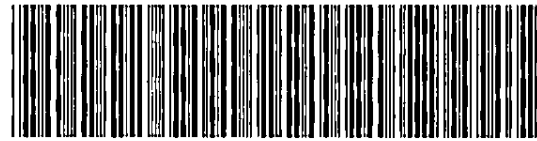
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Articles of Dissolution Liberty Locksmiths and Security Products, Inc.

DOCUMENT NUMBER: P99000078761

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

Please return all correspondence concerning this matter to the following:

Barbara A Kowal

(Name of Contact Person)

Liberty Locksmiths and Security Products, Inc

(Firm/Company)

2061 Panoramic Circle

(Address)

Apopka, Florida 32703

(City/State and Zip Code)

For further information concerning this matter, please call:

Barbara A Kowal

at (407-620-4152

(Name of Contact Person)

(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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee

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:

Liberty Locksmiths and Security Products, Inc.

SECOND: The document number of the corporation (if known): P99000078761

THIRD: The date dissolution was authorized: May 29, 2021

Effective date of dissolution if applicable: December 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: Barbara A. Kowal

(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)

Barbara A Kowal

(Typed or printed name of person signing)

Secretary/Treasurer

(Title of person signing)

Filing Fee: \$35

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CLERK OF STATE
TALLAHASSEE, FL

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: Liberty Locksmiths and Security Products, Inc.

The above named corporation is the subject of dissolution and the effective date of a dissolution is: December 31, 2021

(date filed with the Dept. if date specified in the Articles of Dissolution)

Description of information that must be included in a claim:

On March 9, 2018, The Officers/Owners, Individually and Separately financed the sale of Liberty Locksmiths and Security Products, Inc. assets to Ken Kupferman, President/Owner of Security Services of Tampa, Inc., mailing address P.O. Box 17944, Tampa, FL. On May 29, 2021, the parties entered into a debt settlement agreement marking the loan paid in full. With the exception of the company's last corporate tax return for 2021, all administrative business has been resolved and/or concluded.

Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations)

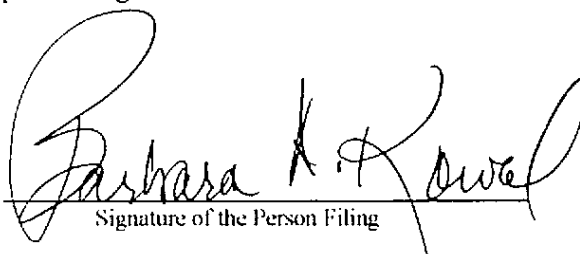
Robert T. Kowal, 5717 TARLETON WAY, MOUNT DORA, FL 32757-8065

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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.

Barbara A Kowal

Printed Name of the Person Filing


Signature of the Person Filing