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CORPORATE . When you need ACCESS to the world ACCESS, ____

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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	Pl	ICK UP:	BROOK 3/21		
	CERTIFIED COPY	Y			
XX	РНОТОСОРУ				 _
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XX	FILING	DIS	SSOLUTION		
	CMB-TECH, INC.	OCUMENT #)			
•		,			
_	(CORPORATE NAME AND D	OCUMENT #)	<u> </u>		
• -	(CORPORATE NAME AND D	OCUMENT #)		.	
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	(CORPORATE NAME AND D	OCUMENT #)			
PECIAL ISTRUC	CTIONS:				

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Dissolution of CMB-TECH, INC.	
DOCUMENT NUMBER:	
The enclosed Articles of Dissolution and	fee are submitted for filing.
Please return all correspondence concerning	ng this matter to the following:
Lilly Y. W. Bourguignon	
(Name of	Contact Person)
CMB-Tech, Inc.	
(Fire	m/Company)
651 Sequoia Valley Rd.	
(A	ddress)
Mill Valley, CA 94941	
(City/Sta	ite and Zip Code)
For further information concerning this mat	tter, please call:
Megan Orr	at (at (
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amou	int:
	□ \$43.75 Filing Fee & □ \$52.50 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 Tailahassee, FL 32314	Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

of 4

2/14/2004 2 14 224

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: CMB-TECH, INC.							
SECOND:	The document number of the corporation (if known):							
THIRD:	The date dissolution was authorized:							
	Effective date of dissolution if applicable: 03-14-24							
	(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. The provided HARD 1999							
	Lilly Y. W. Bourguignon							
·	(Typed or printed name of person signing)							
; -	Director Lilly y. W. Bourgingray							
	(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:____ The above named corporation is the subject of dissolution and the effective date of a dissolution is: $\frac{03-14-24}{2}$ (date filed with the Dept. if date specified in the Articles of Dissolution) Description of information that must be included in a claim: Name of Claimant, Address of Claimant, Copy of invoice. Description of Claim, Date Claim submitted, Amount of Claim Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations) 651 Sequoia Valley Rd Mill Valley, CA 94941 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

Lilly Y. W. Bourguignon

Printed Name of the Person Filing