

| (Re | questor's Name) | |
|-------------------------|-------------------|-------------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Ĉit | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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| | | |

Office Use Only







COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

| Division of Corporations | | | | | |
|--|--|--|--|--|--|
| SUBJECT: DISSOLUTION O | OF THE BEN NEVIS CORCURTION | | | | |
| DOCUMENT NUMBER: 5 48 | 125 | | | | |
| The enclosed Articles of Dissolution and fe | ee are submitted for filing. | | | | |
| Please return all correspondence concerning | g this matter to the following: | | | | |
| MARIANNA | SIROLL | | | | |
| · | Contact Person) | | | | |
| 3/6 Band C | Company) | | | | |
| (Firm | n/Company) | | | | |
| 2070 Á | PINELINE BLVO | | | | |
| (Ad | idress) | | | | |
| Sines | CITA FL. 34237 | | | | |
| (City/State | e and Zip Code) | | | | |
| For further information concerning this matt | ter, please call: | | | | |
| David S. Bando RSS (Name of Contact Person) | at (947) 366-8015 (Area Code) (Daytime Telephone Number | | | | |
| Enclosed is a check for the following amoun | | | | | |
| □ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status | ☐ \$43.75 Filing Fee & | | | | |
| Mailing Address: | Street Address: | | | | |
| Amendment Section Division of Corporations | Amendment Section Division of Corporations | | | | |
| P.O. Box 6327 | The Centre of Tallahassee | | | | |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

| FIRST: | The name of | of the corpo | ne Florida Depart | tment of State: | | | | | |
|---------|----------------|---|---|----------------------|--|-----------------------|-----------|--|--|
| | THE | 13,500 | NEVIS | Corros | A FILON | | | | |
| SECOND: | The docum | ent number | of the corporati | on (if known): | 568125 | | | | |
| THIRD: | The date di | The date dissolution was authorized: Jung. 1, 2021 | | | | | | | |
| | Effective da | ate of dissol | ution <u>if applicat</u> | ole: Juna (no mor | 1, 2021 te than 90 days after di | issolution file date) | | | |
| | Note: If the o | late inserted in | this block does no it's effective date o | t meet the applica | able statutory filing | requirements, this d | iate will | | |
| FOURTH: | | Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation. | | | | | | | |
| | an ince | orporator - if in luciary) | the hands of a receive | | rs have not been selec court appointed fiduci | | FILED | | |
| | | | or printed name of p | | | | | | |
| | | | ECTIA | | | | <u>_</u> | | |
| | | (| Title of person signin | g) | | | | | |

Filing Fee: \$35