(Requestor's Name)
(requester straine)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
-
(
Di55-

Office Use Only



700439041877

11/13/24--01032--005 **43.75

SECRETARY OF STATE TAILLAHASSEE, FL

2024 NOV 13 PH 1: 14

COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations
SUBJECT: DISSOLUTION OF CORPORATION
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LARRY A. HOLT
(Name of Contact Person)
TECHNICAL # OFFICE PERSONNEL SPECIALISTS, 100 C
(Firm/Company)
ZIBLACK SACK CIRCLE
(Address)
PORTORANGE, FL 32)28 (City/State and Zip Code)
(City/State and Zip Code) $S = \frac{S}{M} = \frac{S}{M}$
For further information concerning this matter, please call:
(Address) PORT ORANGE, FL 32)28 (City/State and Zip Code) For further information concerning this matter, please call: LARRY A. HOLT (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: \$\frac{386}{453-5365}\$\$ (Area Code) (Daytime Telephone Number) \$\frac{355}{250}\$ Filing Fee & \$\frac{543.75}{250}\$ Filing Fee, Certificate of Status Certified Copy Certificate of Status &
(Maine of Contact Letwin) (Mea code) (18a) and Felephane Calmer,
Enclosed is a check for the following amount:
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The 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 the corporation as currently filed with the Florida Department of S	State:
	TECHNICAL & OFFICE PERSONNEL SPECIALISTS) 100
SECOND:	The document number of the corporation (if known): Y47060	<u> </u>
THIRD:	The date dissolution was authorized: 10-31-2024	
	Effective date of dissolution <u>if applicable</u> : 11-5-2024	
	(no more than 90 days after dissolution fil Note: If the date inserted in this block does not meet the applicable statutory filing requirement 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 c	hapter and
	the articles of incorporation.	٦,
	į	TALLAHKY OF STAT
	$\bar{\delta}$	24
	רי ה	
	· 	S 17.
		TE
:	Signature: Sary a, Holt	
	(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)	
	LARRY A. HOLT	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

Filing Fee: \$35