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Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6300

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.

Account Number : 076077001702 : (407)841-1200 Phone

Fax Number : (407)423-1831

DISSOLUTION OR WITHDRAWAL KELLYCO DETECTOR DISTRIBUTORS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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Corporate Filing Menu

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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:			
	Kellyco Detector Distributors, Inc.			
SECOND:	The document number of the corporation (if known):			
THIRD:	The date dissolution was authorized: April 22, 2019			
	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:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.			
	Dissolution was approved by the shareholders through voting groups.			
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:			
	The number of votes cast for dissolution was sufficient for approval by			
	(voting group)			
	PH 2: 13 PF STATE FLORIDA			
	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)			
	Leita C. Auerbach			
	(Typed or printed name of person signing)			
	President .			
	(Title of person signing)			

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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.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Name of Claimant: Address of Claimant: Amount of Claim: Basis of Claim (attach separate sheet, if necessary): Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporation R 30 F 1085 Belle Avenue Winter Springs, FL 32708 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. Leita C. Auerbach Printed Name of the Person Filing Signature-settle Person Filing	Name of Corporation: Kellyco Detector Distributors, Inc.	
Name of Claimant: Address of Claimant: Amount of Claim: Basis of Claim (attach separate sheet, if necessary): Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 1085 Belle Avenue Winter Springs, FL 32708 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. Leita C. Auerbach		he Department of State or as
Address of Claimant: Amount of Claim: Basis of Claim (attach separate sheet, if accessary): Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 20	Description of information that must be included in a claim:	
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Basis of Claim (attach separate sheet, if necessary): Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations 200 F1 1085 Belle Avenue Winter Springs, FL 32708 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. Leita C. Auerbach	Address of Claimant;	·
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Leita C. Auerbach	Winter Springs, FL 32708	Logar 7:
Leita C. Auerbach		
- A Little Comments of the Com		ess a proceeding to enforce the claim is commenced
		The Market