

P15000008678

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

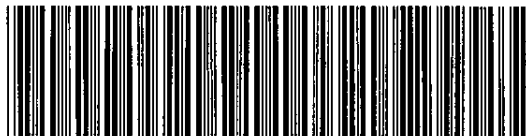
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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SECRETARY OF STATE  
AUG 18 2015

2015 AUG 18 AM 11:31

AUG 20 2015  
C. CARROTHERS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SW FL WRESTLING Academy Inc.

**DOCUMENT NUMBER:** P15000008678

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

Please return all correspondence concerning this matter to the following:

Angelo Favara  
(Name of Contact Person)

SW FL WRESTLING Academy Inc.  
(Firm/Company)

3342 Middletown St.  
(Address)

Port Charlotte FL 33952  
(City/State and Zip Code)

For further information concerning this matter, please call:

Angelo Favara at (941-661-7431)  
(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  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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:

SW FL WRESTLING Academy Inc.

SECOND: The document number of the corporation (if known): P15000008678

THIRD: The file date of the articles of incorporation: 01-27-2015

FOURTH: (CHECK AT LEAST ONE BOX)

☐ None of the corporation's shares have been issued.

☒ The corporation has not commenced business.

FIFTH: No debt of the corporation remains unpaid.

SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

☐ A majority of the incorporators authorized the dissolution.

☒ A majority of the directors authorized the dissolution.

Signature:

Angelo Favara (Secretary)  
(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.)

Angelo Favara  
(Typed or printed name of person signing)

Secretary  
(Title of Person Signing)

Filing Fee: \$35

2015 AUG 18 AM 11:31

FILED

**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: S W FL WRESTLING Academy Inc.

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:

N/A

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

3342 Middletown St.  
Port Charlotte,  
FL 33952

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.

Angelo Favara  
Printed Name of the Person Filing

Angelo Favara  
Signature of the Person Filing