

L19000002033

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

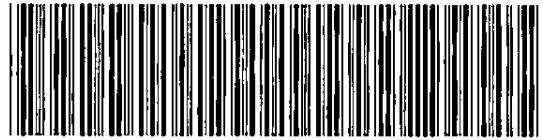
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Wmills

Office Use Only



700424899417

000000-000000-000000

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Costanzo Enterprises LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Costanzo

(Name of Person)

Costanzo Enterprises LLC

(Firm/Company)

104 Lighthouse Circle Unit E

(Address)

Tequesta, FL 33469

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Costanzo

(Name of Person)

845

at (

380-6091

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee and Certificate of Dissolution

☐ \$55.00 Filing Fee, Certificate of Dissolution &
Certified Copy (additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Costanzo Enterprises LLC

2. The Articles of Organization were filed on December 28th, 2018 and assigned

document number L19000002033

3. The delayed effective date the dissolution is not effective on the date of filing: _____
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

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.

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

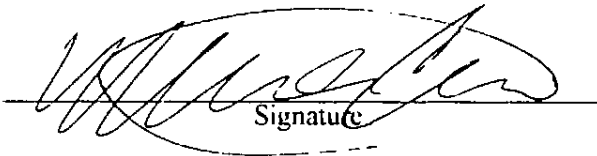
No longer generating revenue

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Michael Costanzo

104 Lighthouse Circle Unit E

Tequesta FL 33469

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:


Signature

Michael Costanzo

Printed Name

FILING FEE: \$25.00