

N03000003000

(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:

615-344-1035

Office Use Only



400211098024

09/14/11--01023--004 **13.75

08/19/11--01009--018 **30.00

FILED
11 SEP 14 AM 10:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VOL DIS
CRO
9/16



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 24, 2011

*Resubmitting for
Dissolution*

ANDREA D'AGOSTINO
TEAM MAPEI CYCLING INC.
707 CERRO VISTA DR.
GOODLETTSVILLE, TN 37072

SUBJECT: TEAM MAPEI CYCLING INC
Ref. Number: N03000003000

We have received your document for TEAM MAPEI CYCLING INC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$13.75 is due.

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 211A00019845

RECEIVED
11 SEP 12 AM 9:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Team Mapei Cycling Inc.

DOCUMENT NUMBER: H03000106980 Ref # NO 300003000

The enclosed ~~Articles of Amendment~~ and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Andrea D'Agostino
Name of Contact Person

Team Mapei Cycling Inc.
Firm/ Company

707 Cerro Vista drive
Address

Gadsdenville, TN 37072
City/ State and Zip Code

avjdagostino@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andrea D'Agostino at (561) 445 3949
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status
Note - \$30 has already
been submitted | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is enclosed) | <input type="checkbox"/> \$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

FILED
11 SEP 14 AM 10:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

Team Mapei Cycling Inc.

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

110300003000

THIRD: Adoption of Dissolution

(COMPLETE SECTION I OR II)

SECTION I

If the corporation has members entitled to vote:

(CHECK/COMPLETE ONE)

_____ Date of the meeting of members at which the resolution to dissolve was adopted

_____ The number of votes cast by the
members was sufficient for approval.

☒ The resolution was adopted by written consent of the members and executed in
accordance with section 617.0701, Florida Statutes.

SECTION II

If the corporation has no members or members entitled to vote on the dissolution:

The corporation has no members or members entitled to vote on the dissolution.

The date of adoption of the resolution by the board of directors was _____

The number of directors in office was _____ and the vote for resolution was

_____ for and _____ against. (must be a majority vote)

09/14/2011 07:50 6153441035
000-245-6897

LAW OFFICES
FL DEPT OF STATE

PAGE 03/03

PAGE 05/05

FOURTH: Effective date of dissolution if applicable: 8/31/11
(no more than 90 days after dissolution file date)

Signature Andrea D'Agostino - Secretary
(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Andrea D'Agostino
(Typed or printed name of the person signing)

Secretary, Treasurer
(Title of person signing)

FILING FEE: \$35