

N980000003154

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

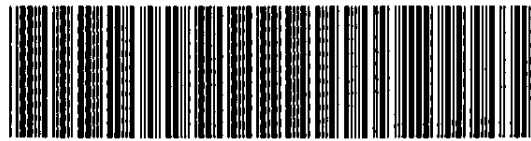
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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05/26/11--01004--006 **35.00

FILED
2011 MAY 26 PM 4:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DR
6/1/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Cove Homeowners Association of Naples, Inc.
Name of Corporation

DOCUMENT NUMBER: N98000003154

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jason Hamilton Mikes, Esq.
Name of Contact Person

Hamilton Mikes, P.A.
Firm/Company

9130 Galleria Court, Suite 328
Address

Naples, FL 34109
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jason Hamilton Mikes at (239) 594-7227
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

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

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALL ABOUT SUBS INC

DOCUMENT NUMBER: P09000033626

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

Please return all correspondence concerning this matter to the following:

LUIGI G GALLUZZO

(Name of Contact Person)

ALL ABOUT SUBS INC

(Firm/Company)

1421 SOUTH POWERLINE RD.

(Address)

POMPANO BEACH, FL 33069

(City/State and Zip Code)

For further information concerning this matter, please call:

LUIGI G GALLUZZO

(Name of Contact Person)

at 954-200-2543

(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

FILED

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

2011 MAY 26 PM 4:13

SECRETARY OF STATE
FLORIDA DEPARTMENT OF STATE

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

ALL ABOUT SUBS INC

SECOND: The document number of the corporation (if known): P09000033626

THIRD: The file date of the articles of incorporation: 4/14/2009

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.

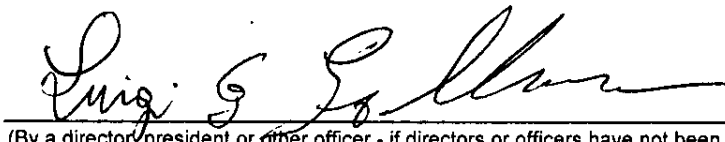
SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

☐ A majority of the incorporators authorized the dissolution.

☒ A majority of the directors authorized the dissolution.

Signature: _____



(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.)

LUIGI G GALLUZZO

(Typed or printed name of person signing)

PRESIDENT

(Title of Person Signing)

Filing Fee: \$35