

P000000018587

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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FILED  
10 DEC 20 PM 2:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Roberts DEC 23 2010

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** AGOSTINO'S DESIGN GROUP, INC.

**DOCUMENT NUMBER:** P00000018587

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

Please return all correspondence concerning this matter to the following:

Noelle M. Melanson, Esq.

(Name of Contact Person)

Melanson Law PA

(Firm/Company)

1620 Medical Lane, Suite 122

(Address)

Fort Myers, Florida 33907

(City/State and Zip Code)

For further information concerning this matter, please call:

Noelle M. Melanson

(Name of Contact Person)

at ( 239 ) 689-8588

(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 607.1403, 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:  
AGOSTINO'S DESIGN GROUP, INC.

SECOND: The document number of the corporation (if known): P00000018587

THIRD: The date dissolution was authorized: 1 November 2010

Effective date of dissolution if applicable: 1 November 2010  
(no more than 90 days after dissolution file date)

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)

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)

David Sciacqua

(Typed or printed name of person signing)

President

(Title of person signing)

**Filing Fee: \$35**

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TALLAHASSEE, FLORIDA

## 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: AGOSTINO'S DESIGN GROUP, 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:

The consideration for this debt (list nature of debt, e.g., loan, breach of contract, unpaid invoice).

The writing on which this claim is based [identify nature of written agreement if any, e.g. contract, agreement, purchase order, credit agreement].

Attach a full, true and accurate copy or copies of the documents identified as the basis for this claim.

The amount of the claim. Attach full, true and accurate copies of all statements, billings or invoices which support the amount claimed.

The priority of the claim designated as (a) secured; (b) priority unsecured; (c) general unsecured; or (d) priority tax.

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

AGOSTINO'S DESIGN GROUP, INC.

c/o Melanson Law PA

1620 Medical Lane, Suite 122

Fort Myers, Florida 33907

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.

David Sciacqua

Printed Name of the Person Filing



Signature of the Person Filing

**Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00**