## P00000112861

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## **COVER LETTER**

<b>TO:</b> Amendment Section Division of Corporations	
SUBJECT: Articles	of Dissolution
DOCUMENT NUMBER: POO	00011286)
The enclosed Articles of Dissolution and fee	are submitted for filing.
Please return all correspondence concerning the	nis matter to the following:
EVE D'LUGO (Name of Co	)
(Name of Co	ntact Person)
(Firm/C	Company)
	Town Center Blud. #461 ress)
Orland (City/State	do, FL 32837 and Zip Code)
For further information concerning this matter	r, please call:
(Name of Contact Person)	at ( 407) 908-2450 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## 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:

	D'Lugo and DeFlora, P.A.		
SECOND:	The document number of the corporation (if known):		
THIRD:	The date dissolution was authorized:		
	Effective date of dissolution if applicable:  October 26, 2023  (no more than 90 days after dissolution file date)		
	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.		
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.		
,	Signature:  (By a director president of other officer - if directors or officers have not been selected, by an incorporator - it in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)		
	Nina Grace DeFlora		
	(Typed or printed name of person signing)		
	officer/director		
	(Title of person signing)		

Filing Fee: \$35