

PO20000025747

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

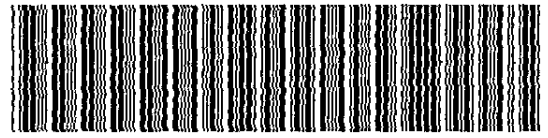
(Business Entity Name)

(Document Number)

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06 JAN 24 PM 12:50  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

2006 JAN 27 2006

Dis-  
notice

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

January 17, 2006

**SUBJECT:** James S. Bendza, P.A. Please refer to original file date to  
~~permit an effective date of 12/31/05~~

**DOCUMENT NUMBER:** P02000025747

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

Please return all correspondence concerning this matter to the following:

James S. Bendza, President

(Name of Contact Person)

James S. Bendza, P.A.

(Firm/Company)

18 Newbury Place

(Address)

Naples, FL 34104-7801

(City/State and Zip Code)

For further information concerning this matter, please call:

James S. Bendza

at ( 239 ) 353-6995

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount: N/A; \$ 35 check held by Dept. of  
State, with 12/29/05 submission.

- ☐ \$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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 10, 2006

JAMES S BENDZA, P.A.  
18 NEWBURY PL  
NAPLES, FL 34104-7801

SUBJECT: JAMES S. BENDZA, P.A.  
Ref. Number: P02000025747

We have received your document for JAMES S. BENDZA, P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

The document must have original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6927.

Tracy Smith  
Document Specialist

Letter Number: 906A00001783

## 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:

James S. Bendza, P.A.

SECOND: The document number of the corporation (if known): P02000025747

THIRD: The date dissolution was authorized: 12/29/05  
Effective date of dissolution if applicable: 12/31/05 James S. Bendza is authorize to wrap-up corporate business until January 31, 2006  
(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 of 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: James S. Bendza

(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, that fiduciary)

James S. Bendza

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35

FILED  
06 JAN 24 PM 12:50  
SECRETARY OF STATE  
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: James S. Bendza, P.A.

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:

Nature of claim, claimant's name & address & telephone number, basis of claim,

date claim allegedly arose, list of corroborating attachments

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

James S. Bendza, as President of a dissolved corporation

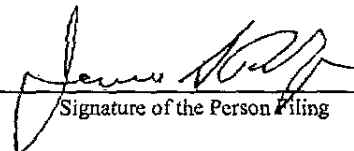
18 Newbury Place

Naples, FL 34104-7801

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.

James S. Bendza

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