

PO2000114245

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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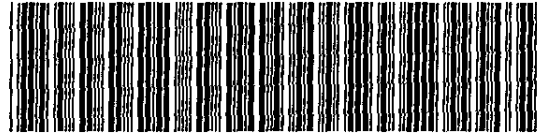
(Business Entity Name)

(Document Number)

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04 MAR 15 PM 1:30  
ALLAHASSEE, FLORIDA

3/18/04  
DSS

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CORPORATE DISSOLUTION

**DOCUMENT NUMBER:** P02000114245

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

Please return all correspondence concerning this matter to the following:

MICHELE GRIECO

(Name of Person)

M & G ASSOCIATES OF FLORIDA, INC.

(Name of Firm/Company)

C/O MICHELE GRIECO, #1707, 300 BAYVIEW DR.

(Address)

SUNNY ISLES BEACH, FL 33160

(City/State/and Zip Code)

For further information concerning this matter, please call:

PHILIP C. KEANEY, CPA

(Name of Person)

at (570) 288-3651

(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, Florida 32314

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

## 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 Department of State:

M & G ASSOCIATES OF FLORIDA, INC.

SECOND: The document number of the corporation (if known): P02000114245

THIRD: The date dissolution was authorized: SEPTEMBER 30, 2003

Effective date of dissolution if applicable: N/A  
(no more than 90 days after dissolution file)

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

(NOT APPLICABLE)

(voting group)

Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Signature:

Michele Grieco

(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)

MICHELE GRIECO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

FILED  
04 MAR 15 PM 1:30  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA