

PO3000133691

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

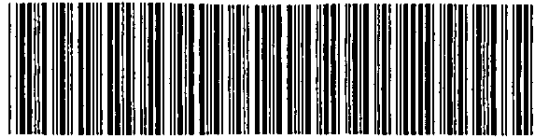
(Document Number)

Certified Copies \_\_\_\_\_

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08 FEB 13 AM 11:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

VOID'S  
notice  
2/14



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 30, 2008

GABRIELE MENDHI  
121 CREEK HOLLOW LANE  
MIDDLEBURG, FL 32068

Ref. Number: P3000133691

*CRIGARO, JAC.*

We have received your document for , however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

You have submitted two documents to dissolve the subject corporation. Please choose the correct type of dissolution according to Florida Statutes and resubmit only one document.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson  
Document Specialist Supervisor

Letter Number: 508A00006419

RECEIVED  
DIVISION OF CORPORATIONS  
FLORIDA

2008 FEB 13 10:00 AM

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Department of Corporations

**DOCUMENT NUMBER:** PO3000133691

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

Please return all correspondence concerning this matter to the following:

GABRIELE MENDHI

(Name of Contact Person)

(Firm/Company)

121 CREEK HOLLOW LANE

(Address)

MIDDLEBURG FL 32068

(City/State and Zip Code)

For further information concerning this matter, please call:

GABRIELE MENDHI at (904) 282-5544

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>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

2000 JAN 28 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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:

CRIGARO INC

SECOND: The document number of the corporation (if known): P0300013369

THIRD: The file date of the articles of incorporation: 2003

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.)

GABRIELE MENDHI

(Typed or printed name of person signing)

GABRIELE MENDHI, PRESIDENT

(Title of Person Signing)

Filing Fee: \$35

FILED  
08 FEB 13 AM 11:30  
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: CRIGARO 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:

This company never executed  
business

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

121 CREEK HOLLOW LANE  
MIDDLEBURG FL 32068

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.

[Signature]  
Printed Name of the Person Filing

GABRIELE  
Signature of the Person Filing

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