

P04000012745

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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07 AUG 29 PM 2:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*dis w/NOT*

C. Coufflette SEP 04 2007

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DISSOLUTION OF FLORIDA PROFIT CORP.

**DOCUMENT NUMBER:** #PO4000012745

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

Please return all correspondence concerning this matter to the following:

ANN P. PEARSON  
(Name of Contact Person)

CONTESSA BOTANICALS  
(Firm/Company)

(22029 SEASHORE CIRCLE)  
(Address)

(ESTERO, FL 33828)  
(City/State and Zip Code)

NEW

1256 MERLENE PL

ORLANDO, FL 32804

For further information concerning this matter, please call:

ANN PEARSON  
(Name of Contact Person)

at (321) 274-5058  
(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 607.1401, 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:

CONTESSA BOTANICALS INC.

SECOND: The document number of the corporation (if known): PD4000012743

THIRD: The file date of the articles of incorporation: \_\_\_\_\_

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.)

ANN P. PEARSON  
(Typed or printed name of person signing)

PEARSON PRESIDENT  
(Title of Person Signing)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

07 AUG 29 PM 2:53

APPROVED  
AND  
FILED

Filing Fee: \$35

## 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: COUTESSA BOTANICALS, 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:

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

1256 MERCEDS PLACE  
ORLANDO, FL. 32804  
321-274-5058

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.

ANN P. PEARSON  
Printed Name of the Person Filing

A Pearson  
Signature of the Person Filing

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