

PO4000129770

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300234742703

05/08/12--01002--016 **35.00

FILED
2012 JUN 15 AM 11:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DSS/cw/mcg
6-15-12



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 14, 2012

SONDRA R. ISGRIG, PA
10315 EUSTON AVENUE
ENGLEWOOD, FL 34224

SUBJECT: SONDRA R. ISGRIG, P.A.
Ref. Number: P04000129770

We have received your document for SONDRA R. ISGRIG, P.A. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Articles of Revocation of Dissolution cannot be filed for an active Florida corporation. If you are trying to voluntarily dissolve the corporation enclosed is information on filing Articles of Dissolution.

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

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) 245-6050.

Sylvia Gilbert
Regulatory Specialist II

Letter Number: 212A00014195

RECEIVED
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2012 JUN 15 AM 8:07
RETURNED
TO AGENCY OF ORIGIN
SUFFICIENCY OF RETURN

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: _____

DOCUMENT NUMBER: UCSFL43R

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

Please return all correspondence concerning this matter to the following:

Sandra R. Isgrig
(Name of Contact Person)

Sandra R. Isgrig PA
(Firm/Company)

10315 Euston Ave
(Address)

Englewood FL 34224
(City/State and Zip Code)

For further information concerning this matter, please call:

Sandra R. Isgrig at (941) 400-1448
(Name of Contact Person) (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 607.1403, 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:

Southern R. T. Squire, Inc.

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

784000129770

THIRD: The date dissolution was authorized:

3-31-12

Effective date of dissolution if applicable:

3-31-12

(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 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: _____

(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)

Southern R. T. Squire
(Typed or printed name of person signing)

President
(Title of person signing)

FILED
2012 JUN 15 AM 11:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Sandra R. Tsgirly PA

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:

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

10315 Euston Ave
Englewood FL 34224

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.

Sandra R. Tsgirly

Printed Name of the Person Filing

[Signature]

Signature of the Person Filing

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