

POS 000054734

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

(Business Entity Name)

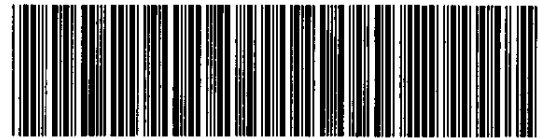
(Document Number)

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12-11-09



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DS  
86

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DESIGN ADVICE, INC.

**DOCUMENT NUMBER:** P05000054734

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

Please return all correspondence concerning this matter to the following:

CARL J GRECO

(Name of Contact Person)

CARL GRECO ACCOUNTING INC

(Firm/Company)

3949 EVANS AVE #403

(Address)

FORT MYERS FL 33901

(City/State and Zip Code)

For further information concerning this matter, please call:

CARL J GRECO

(Name of Contact Person)

at ( 239 ) 275-7766

(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)

*FL. Dept of State*

**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:

DESIGN ADVICE, INC.

SECOND: The document number of the corporation (if known): P05000054734

THIRD: The date dissolution was authorized: 12/1/2009

Effective date of dissolution if applicable: 12/1/2009

(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

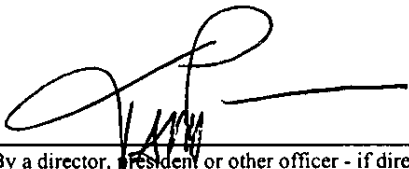
☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ 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)

TAMMY D PROVENCE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

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TALLAHASSEE, FLORIDA