P06000053027

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09 MAR 25 PM 3 00 SECRETARY OF STATE TALLAHASSEE, FLORIS

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Jour Soll

COVER LETTER

Division of Corporations	
SUBJECT: Articles of Disso	lution
DOCUMENT NUMBER: POGODOS	3027
The enclosed Articles of Dissolution and fee are sub	mitted for filing.
Please return all correspondence concerning this matt	er to the following:
Name of Contact Po	
(Name of Contact Pe	erson)
Ci & Prostianni and Associ	ates. Inc
(Firm/Compan	у)
(Firm/Compan) White Strain and Hasser (Firm/Compan) (Firm/Compan) (Address) (City/State and Zip) For further information concerning this matter, please	
(Address)	
LAHE THE THE THE THE THE THE THE THE THE T	
5 Wat Fort Pierce Florida	3495V
(City/State and Zip	Code)
For further information concerning this matter, please	e call:
Soverh Prostiens at (112) 5/9-2286
(Name of Contact Person)	772) 579-2286 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & \$\Bigcup \$43.75 \\ Certificate of Status Certific	Filing Fee & _\\$52.50 Filing Fee, ed Copy Certificate of Status &
	onal copy is Certified Copy
enclos	ed) (Additional copy is enclosed)
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 16, 2009

JOSEPH PRESTIANNI PRESTIANNI AND ASSOCIATES, INC. 5408 DEER;RUN DR. FORT PIERCE, FL 34951

SUBJECT: PRESTIANNI & ASSOCIATES, INC.

Ref. Number: P06000053027

We have received your document for PRESTIANNI & ASSOCIATES, INC., 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: 809A00008859

SECRETARY OF STATE TALL AHASSEE, FLORIDA

2009 MA 24 AAM 8: 00

RECEIVED

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 o	f State:	
	Prestianni and Associates, Inc.		
SECOND:	The document number of the corporation (if known): POLOGOO 6302	7	
THIRD:	The date dissolution was authorized: 3/4/09		
	Effective date of dissolution if applicable: (no nfore than 90 days after dissolution	file date)	
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for dissolution	n
	Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting group e to vote separately on the plan to dissolve:	entitled	
	The number of votes cast for dissolution was sufficient for approval by	09 MAR 2 SECRETA	
	Signature:	MAR 25 PH 35 UU CRETARY OF STATE LAMASSEE, FLORIDA) i
	an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)		
	(Typed or printed name of person signing)		
	President (Title of nerson signing)		

Filing Fee: \$35