

P07000010517

(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



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02/18/08--01026--008 **52.50

FILED

2008 FEB 27 PM 5:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D.S.
S
2-27-08



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 20, 2008

JAMES LAGREGA
DESIGNER CONCEPTS INC
6211 SW 37TH STREET, APT. 212
DAVIE, FL 33314

SUBJECT: DESIGNER CONCEPTS INC
Ref. Number: P07000010517

We have received your document for DESIGNER CONCEPTS INC and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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) 245-6908.

Sylvia Gilbert
Regulatory Specialist II

Letter Number: 308A00010812

RECEIVED
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

2008 FEB 27 AM 8:00

RECEIVED

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Please Close Designer Concepts Inc.

DOCUMENT NUMBER: PO 7000010517

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

Please return all correspondence concerning this matter to the following:

JAMES LAGREGA
(Name of Contact Person)

Designer Concepts Inc.
(Firm/Company)

6211 SW 37 ST Apt 212
(Address)

DAVIE Fla. 33314
(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES LAGREGA at (954) 557-1774
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount: Already sent

- ☐ \$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

FILED
2008 FEB 27 PM 5:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Designer Concepts Inc

SECOND: The document number of the corporation (if known): P07000010517

THIRD: The file date of the articles of incorporation: JAN 23 2007

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: James La Gega President

(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.)

JAMES HAGREGA

(Typed or printed name of person signing)

President of Designer Concepts Inc.

(Title of Person Signing)

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: DESIGNER CONCEPTS 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:

A Voluntary Dissolution

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

JAMES HAGREGA
6211 SW 37 ST Apt 212
DAVIE FL. 33314

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.

JAMES HAGREGA

Printed Name of the Person Filing

James L. Hega

Signature of the Person Filing

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