

PO9 000059365

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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12/29/10--01010--020 \*\*35.00

Effective: 12-31-10

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DC

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 DEC 29 PM 12:08

FILED

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DISSOLUTION

**DOCUMENT NUMBER:** P09000059365

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

Please return all correspondence concerning this matter to the following:

MARLISSE TESTA

(Name of Contact Person)

TESTA COUNSELING, INC.

(Firm/Company)

21640 NAPA COURT

(Address)

BOYNTON BEACH, FL 33433

(City/State and Zip Code)

For further information concerning this matter, please call:

MARLISSE TESTA

(Name of Contact Person)

at ( 954 ) 547-4070

(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:

TESTA COUNSELING, INC.

SECOND: The document number of the corporation (if known): P09000059365

THIRD: The date dissolution was authorized: DECEMBER 14, 2010

Effective date of dissolution if applicable: DECEMBER 31, 2010

(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

MARLISSE TESTA, SOLE SHAREHOLDER

(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)

MARLISSE TESTA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

**Filing Fee: \$35**

FILED  
10 DEC 29 PM 12:00  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## 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: TESTA COUNSELING, 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:

ANY CLAIM AGAINST THE CORPORATION MUST INCLUDE THE NAME OF  
THE PERSON MAKING SUCH CLAIM, ANY EVENTS OR ACTIONS THAT  
CAUSED SAID PERSON TO MAKE CLAIM AND THE DATE THAT THE  
EVENTS OR ACTIONS FIRST TOOK PLACE. CONTACT INFORMATION OF  
CLAIMANT MUST ALSO BE INCLUDED ALONG WITH ANY REPRESENTATION

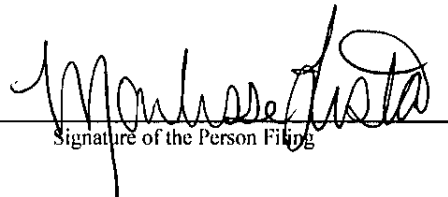
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

MARLISSE TESTA  
21640 NAPA COURT  
BOCA RATON, FL 33433

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.

MARLISSE TESTA

Printed Name of the Person Filing

  
Signature of the Person Filing

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