# P10000036191

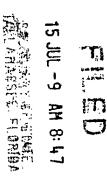
(F	Requestor's Name)			
(/	Address)			
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(0	City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
<u>(</u> I	Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				
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Office Use Only



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# **COVER LETTER**

TO: Amendment Section

Division of Corporations				
subject: Cape Coval	Top Ac	gents, Ir	nC	
DOCUMENT NUMBER: P10000	0036191			
The enclosed Articles of Dissolution and fe	e are submitted for	r filing.	, ma	
Please return all correspondence concerning	this matter to the	folle wing:	S JUL -	Prov
Bill Av (Name of C	Hav G Contact Person)	<u>A</u>	See Floren	
Acco	Cape Coral Tax & Dunting Services, LL Del Prado Blvd. Son ape Coral, FL 33904	uth		
(City/Stat	e and Zip Code)		<del></del>	
For further information concerning this matter	ter, please call:			
Bill Antor CPA (Name of Contact Person)		) 540-75 ode · Daytime Tele		er)
Enclosed is a check for the following amour	nt:			
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing For Certified Copy (Additional copy enclosed)	Certificate of	of Status & opy	
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STF EET ADDRESS Am ndment Section Division of Corpora Clitton Building 266 Executive Cer	tions	

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION:

Pursuant to section 607.1401, Florida Statutes, this Florida pro it corporation submits the following articles of dissolution:

# **FIRST**

The name of the corporation as currently filed with the Florida Department of State:

CAPE CORAL TOP AGENTS, INC.

SECOND  The document number of the corporation:	ال 15	**************************************
1 10000050171	 6-7	Norman Norman Surafan E
THIRD  The file date of the articles of incorporation:	AH 8:	J
ΛΔ/26/2010 Σ>	۲٦	

]	FOURTH:	(CHECK	AT LE	AST	ONE	BOX)
of the co	orporation's	shares hav	e been	issued	i.	

None of the corporation's shares have been issue
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:

(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, trusted, or other court appointed fiduciary, by that fiduciary.)

(Typed or printed name of person signing)

(Title of Person Signing)

# 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. 607.1403, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

# Name of Corporation:

CAPE CORAL TOP AGENTS, INC

Date of dissolution will be the date the dissolution is filed with the Department of State.

# Description of information that must be included in a claim:

- Amount owed
- Copy of signed invoice or Bill or other proof or services solicited or performed
- Claimant name & Address
- Tax ID number

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

1328 SW 1ST AVE CAPE CORAL, FL 33991

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.

Printed Name of the Person Filing

Signature of the Person Filing