

Division of Corporations

Page 1 of 1

PH10000061950

**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000077971 3)))



H140000779713AEC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : JOHN M WICKER PA
Account Number : I20070000104
Phone : (239) 939-2222
Fax Number : (239) 939-2280

**DISSOLUTION OR WITHDRAWAL
FORT MYERS BEACH FLORIST, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

RECEIVED

14 APR -1 PM 4:15

RECEIVED
DIVISION OF CORPORATIONS
APR 1 2014 4:15 PM

14 APR -1 PM 11:47

FILED
SECRETARY OF STATE
OFFICE OF CORPORATIONS
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

*Diss
notice*

APR 02 2015

T. LEMIEUX

H14000077971 3

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:
FORT MYERS BEACH FLORIST, INC.

SECOND: The document number of the corporation (if known): **P11000001950**

THIRD: The date dissolution was authorized: **MARCH 27, 2014**

Effective date of dissolution if applicable: **MARCH 27, 2014**

(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

N/A

(voting group)

Signature: *Michele Desanctis*

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - or in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

MICHELE DESANCTIS

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

H14000077971 3

14 APR - 1 PM 11:47

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H14000077971 3

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: **FORT MYERS BEACH FLORIST, 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:

**NAME OF CREDITOR; PRODUCT OR SERVICE PROVIDED; TOTAL
AMOUNT OF CLAIM; ACCOUNT SUMMARY; INVOICES; AND REFERENCE
TO CONTRACT, IF APPLICABLE.**

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

**FORT MYERS BEACH FLORIST, INC. CLAIMS
C/O MICHELE DESANCTIS
12982 KEDLESTON CIR
FORT MYERS, FL 33912**

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.

MICHELE DESANCTIS

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

H14000077971 3