

P110000028626

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

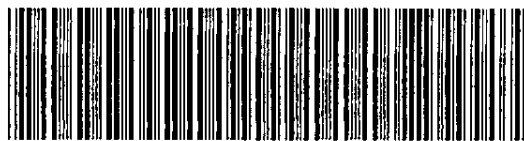
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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11 NOV 14 AM 8:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 3, 2011

HARAY FORTUN  
CUSTOMER SERVICE ADVISOR INC  
175 FONTAINEBLEAU BLVD STE 1A1  
MIAMI, FL 33172

SUBJECT: CUSTOMER SERVICE ADVISORS INC  
Ref. Number: P11000028626

We have received your document for CUSTOMER SERVICE ADVISORS INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

— We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 311A00025015

RECEIVED

11 NOV 14 AM 8:15

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CUSTOMER SERVICE ADVISOR INC.

**DOCUMENT NUMBER:** P11000028626

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

Please return all correspondence concerning this matter to the following:

HARAY FORTUN

(Name of Contact Person)

CUSTOMER SERVICE ADVISOR, INC.

(Firm/Company)

175 Fontainebleau Blvd Ste 1A1

(Address)

Miami FL 33172

(City/State and Zip Code)

For further information concerning this matter, please call:

HARAY FORTUN

(Name of Contact Person)

at ( 706 ) 515-8173

(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

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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:

CUSTOMER SERVICE ADVISOR INC

SECOND: The document number of the corporation (if known): P11000028626

THIRD: The file date of the articles of incorporation: 04/01/2011

FOURTH: (CHECK AT LEAST ONE BOX)

☐ None of the corporation's shares have been issued.

☒ The corporation has not commenced business.

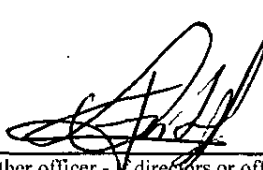
FIFTH: No debt of the corporation remains unpaid.

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: 

(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.)

HARRY FORTUNE

(Typed or printed name of person signing)

PRESIDENT

(Title of Person Signing)

Filing Fee: \$35