P1200078460

(R	lequestor's Name)	
(A	ddress)	
(A	ddress)	
(Č	ity/State/Zip/Phone #)	
PICK-UP	MAIT	MAIL
	Samuel Sa	
(8	Business Entity Name)	
(D	Ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to F	Filing Officer:	
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Office Use Only



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dissolution



2022 OCT 24 - AB 11: LE

A. RAMSEY

OCT 2 5 2022



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	10/24/2022	
Name:	Merritt Walker	
	1812295	
Entity Name	ITALIA IND	EPENDENT USA CORP
	es of Incorporation/Authoriza	
Amen Amen	dment	
Chan	ge of Agent	
Reins	tatement	
Conve	ersion	
☐ Merge	er	
 Disso	lution/Withdrawal	
☐ Fictition	ous Name	
✓ Other	CERTIFIED	COPY OF THE FILING EVIDENCE
Authorized A	mount: \$43.75	
Signature:	mw	

F: 800.944.6607

F: +852.2682.9790

COVER LETTER

TO: Amendment Section **Division of Corporations** Dissolution of ITALIA INDEPENDENT USA CORP SUBJECT: ____ DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Contact Person) ITALIA INDEPENDENT USA CORP (Firm/Company) 4770 BISCAYNE BLVD, SUITE 600 (Address) Miami, FL 33137 (City/State and Zip Code) For further information concerning this matter, please call: ___ at (______929 451 9925 Stefano Ciravegna (Name of Contact Person) (Area Code) (Davtime Telephone Number) Enclosed is a check for the following amount: □ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee. Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

FILED

ARTICLES OF DISSOLUTION

2022 OCT 24 AM 9: 04

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:			
	ITALIA INDEPENDENT USA CORP			
SECOND:	The document number of the corporation (if known):	P12000078460		
THIRD:	The date dissolution was authorized:	10/20/2022		
	Effective date of dissolution <u>if applicable</u> : (no more t Note: If the date inserted in this block does not meet the applicable)	le statutory filing requirements, this date will		
FOURTH:	not be listed as the document's effective date on the Department o Dissolution was approved by the shareholders, in the m the articles of incorporation.			
•	Signature:			
	(By a director, president or other officer - if directors or officers an incorporator - if in the hands of a receiver, trustee, or other co that tiduciary)			
	Stefano Ciravegna			
	(Typed or printed name of person signing)			
	Treasurer			
	(Title of person signing)	.		

Filing Fee: \$35