

P12000092918

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

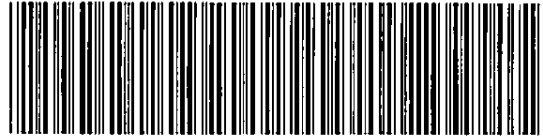
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2024 DEC 30 AM 10:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**MADDEN, JIGANTI, MOORE & SHERIDAN LLP**

ATTORNEYS AT LAW

SUITE 1700

190 SOUTH LA SALLE STREET

CHICAGO, ILLINOIS 60603

TELEPHONE  
(312) 346-4101

FACSIMILE  
(312) 346-4885

December 23, 2024

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Dear Sir or Madam:

Enclosed are the Articles of Dissolution for John F. Newhouse & Company, Inc. (document number P12000092918), along with a cover letter and a check for \$35 in payment of the filing fee. Also enclosed is a Notice of Corporate Dissolution.

Please process the Articles of Dissolution for the entity referenced above. Once the Articles have been successfully processed, please send confirmation that the entity has been dissolved to me at the address below via the self-addressed envelope postage prepaid envelope.

Robert J. Morse  
190 S. LaSalle St., Ste. 1700  
Chicago, IL 60603

If you have any questions or require additional information, please contact me by e-mail at [rmorse@mjsm.com](mailto:rmorse@mjsm.com) or by phone at 312-346-4101.

Very truly yours,

**MADDEN, JIGANTI, MOORE & SHERIDAN LLP**



Robert J. Morse

Enclosures

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** JOHN F. NEWHOUSE & COMPANY, INC.  
\_\_\_\_\_

**DOCUMENT NUMBER:** P12000092918  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

ROBERT J. MORSE  
\_\_\_\_\_

(Name of Contact Person)

MADDEN, JIGANTI, MOORE & SHERIDAN LLP  
\_\_\_\_\_

(Firm/Company)

190 S. LASALLE ST., SUITE 1700  
\_\_\_\_\_

(Address)

CHICAGO, IL 60603  
\_\_\_\_\_

(City/State and Zip Code)

For further information concerning this matter, please call:

ROBERT J. MORSE  
\_\_\_\_\_

at (312) 346-4101  
\_\_\_\_\_

(Name of Contact Person)

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |  |   |   |
|---|--|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>enclosed) |
|---|--|---|---|

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

## 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:  
JOHN F. NEWHOUSE & COMPANY, INC.

SECOND: The document number of the corporation (if known): P12000092918

THIRD: The date dissolution was authorized: 09/19/2024

Effective date of dissolution if applicable: 12/31/2024  
(no more than 90 days after dissolution file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

FOURTH: Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.

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)

JOHN D. NEWHOUSE

(Typed or printed name of person signing)

DIRECTOR

(Title of person signing)

**Filing Fee: \$35**

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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: JOHN F. NEWHOUSE & COMPANY, INC.

The above named corporation is the subject of dissolution and the effective date of a dissolution is: 12/31/2024

(date filed with the Dept. if date specified in the Articles of Dissolution)

Description of information that must be included in a claim:

A brief description of the nature of the claim, the amount of the claim, and the date the claim was incurred.

Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporation

6597 Nicholas Blvd., Unit 1206

Naples, FL 34108

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TALLAHASSEE, FLORIDA

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.

JOHN D. NEWHOUSE

Printed Name of the Person Filing

*John D. Newhouse*

Signature of the Person Filing

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