Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: JOHN M WICKER PA

Account Number : 120070000104

Phone

: (239)939-2222

Fax Number

: (239)939-2280

DISSOLUTION OR WITHDRAWAL CAPTAIN ALEX, INC.

Certificate of Status	0
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Corporate Filing Menu

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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: CAPTAIN ALEX, INC.	
SECOND:	The document number of the corporation (if known): P13000013520	
THIRD:	The date dissolution was authorized: FEBRUARY 6, 2014	
	Effective date of dissolution if applicable: N/A (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	
	(voting group)	
	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)	
	MICHAEL AMBAZIS Muhael Occasi	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

Filing Fee: \$35

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. 607.1 \$407, F.S.

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

Name of Corporation: CAPTAIN ALEX,	INC.
Date of dissolution will be the date the dissolution is specified in the Articles of Dissolution.	
Description of information that must be included in	a claim:
NAME OF CREDITOR; PRODU	CT OR SERVICE PROVIDED; TOTAL
AMOUNT OF CLAIM; ACCOUNT S	SUMMARY; INVOICES; AND REFERENCE
TO CONTRACT, IF APPLICAT	BLE.
Mailing address where claims can be sent: (Claims	cannot be sent to the Division of Corporations)
CAPTAIN ALEX CLA	AIMS
c/o MICHAEL AMBA	ZIS
5245 STRATFORD	CT
CAPE CORAL, FL 3	3904
A claim against the above named corporation will be within 4 years after the filing of this notice.	be barred unless a proceeding to enforce the claim is commenced
MICHAEL AMBAZIS	ingesel Deeping
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