

(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

LaNasa and Associates Dissolution SUBJECT:			
DOCUMENT NUMBER:	10000 AS 8 3	65	
The enclosed Articles of Dissolution and	fee are submitted for filing.		
Please return all correspondence concernir	ng this matter to the following	ng:	
Scott LaNasa			
(Name of	Contact Person)		
LaNasa and Associates			
(Firm/Company)			ت
4880 SE 117th Place			17
(A	Address)		
Belleview, FL 34420			17 JUN 22 PH 4:
(City/St	ate and Zip Code)		72
For further information concerning this matter, please call:		h: 19	
Scott LaNasa	(352) 322-8566 at (
(Name of Contact Person)	(Area Code) (I	Daytime Telephone Numl	per)
Enclosed is a check for the following amor	unt:		
□ \$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:	STREET ADDRESS:		
Amendment Section	Amendment Section		

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

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: LaNasa and Associates				
SECOND:	The document number of the corporation (if known): P140000429				
THIRD:	The date dissolution was authorized:				
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)				
	<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this not be listed as the document's effective date on the Department of State's records.	date will			
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes cast for disso was sufficient for approval.				
	Dissolution was approved by the shareholders through voting groups.	17 4			
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:	310K DE EU 7 JUH 22			
	The number of votes cast for dissolution was sufficient for approval by	17 JUN 22 PH 4: 4.9			
	(voting group)	į.			
	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)				
	Scott LaNasa				
	(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. 607.1407, F.S.

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

Name of Corporation:		man
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .		
Description of information that must be included in a claim:		
The business is closed down and has no assets or value. All employees have been let go as of December 31, 2016.		
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	17)] - 35/1/16
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)	JUN 22	
4880 SE 117th Place, Belleview, FL 34420	2	NAY O
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		- -
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is c within 4 years after the filing of this notice.	ommen	ced
Scott LaNasa Scott So Mas	rc_	<u> </u>
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