P14000046439

(Requestor's Name)
(Address)
, ,
(4.12 - 13
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Discipant Fakity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
·
Special Instructions to Filing Officer:





000415964870

09/26/23--01023--013 **35.00

<u>COVER LETTER</u> '

TO: Amendment Section

Division of Corporations				
SUBJECT: COYA, INC.				
DOCUMENT NUMBER: P14000046439				
The enclosed Articles of Dissolution and	fee are submitted fo	r filing.		
Please return all correspondence concernin	ig this matter to the	following:		
Rochelle Friedman Walk				
(Name of	Contact Person)		2023	SIAH
AEGIS Law			2023 SEP 2	DIVISION OF CORPORATION
(Fin	m/Company)		26	100 K
615 Channelside Dr Ste 207			PM 12: 40	PORA
(A	(ddress)		t 0	
Tampa FL 33602			_	, •
(City/Sta	ate and Zip Code)			
For further information concerning this ma	utter, please call:			
Leila Ros	813-999-01 at (99		
(Name of Contact Person)	(Area C	ode) (Daytime Telephone Nu	mber))
Enclosed is a check for the following amou	ant:			
■ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing I Certified Copy (Additional copy enclosed)	Fee & S52.50 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 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:					
	P14000046439		_			
SECOND:	The document number of the corporation (if known):		_			
THIRD:	The date dissolution was authorized: 9/15/2023		_			
	Effective date of dissolution if applicable:					
	(no more than 90 days after dissolution file Note: If the date inserted in this block does not meet the applicable statutory filing requirements not be listed as the document's effective date on the Department of State's records.	date) i, this dat	e will			
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.					
		2023 SEP 26 PM 12: 4	DIVISION OF CORPORATION			
		O	20 K			
		× ×	03.5			
	Signature: Yaron Avramı (Sep 16, 2023 00:09 GMT+3)	<u>-</u> -				
	(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)	0	<i>₹</i> ,			
	YARON AVRAMI					
	(Typed or printed name of person signing)		_			
	Director					

(Title of person signing)

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:	
The above named corporation is the subject of dissolution and the effective date of a di	issolution is: <u>09/23/2023</u>
(date filed with the Dept. if date specified in the Articles of Dissolution	1)
Description of information that must be included in a claim:	
1. A Description of the nature of the claim	
2. The amount of the claim	2023
3. The date the claim was incurred	SEP
4. The name and address of the claimant	26
Mailing address where written claims can be sent: (Claims cannot be sent to the Division	on of Corporations)
615 Channelside Dr Ste 207	
Tampa, FL 33602	
A claim against the above named corporation will be barred unless a proceeding to enf within 4 years after the filing of this notice.	force the claim is commenced
YARON AVRAMI Printed Name of the Person Filing Signature of	o og GMT-3; of the Person Filing