

P15000048323

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

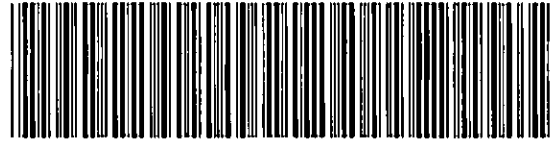
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2020 DEC -7 PM 1:17

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FILED

2020 DEC -7 AM 11:44

RECEIVED
FALL BRAS 1511 LONDON

DEC 10 2020

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 12/07/2020

****WALK IN****

ENTITY NAME CONZA CAPITAL CORP.

DOCUMENT NUMBER P15000048323

****PLEASE FILE THE ATTACHED AND RETURN****

XXXX

Plain Copy

XXXX

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certified Copy of Arts & Amendments Complete File (Including Annual Reports)

Certificate of Status

Certificate of Status Reflecting: _____

****APOSTILLE / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$ 52.50

ACCOUNT # 120140000108
United Corporate
Services, Inc.

Keith Leppard

Please call Tina at the above number for any issues or concerns. *Thank you so much!*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Corporation

DOCUMENT NUMBER: P15000048323

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

Please return all correspondence concerning this matter to the following:

Henry E. Green, Esq.

(Name of Contact Person)

Law Offices of Henry E. Green

(Firm/Company)

1050 Franklin Avenue, Suite 402

(Address)

Garden City, N.Y. 11530

(City/State and Zip Code)

For further information concerning this matter, please call:

Henry E. Green, Esq.

at (516 742-0615
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

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

SECOND: The document number of the corporation (if known): P15000048323

THIRD: The date dissolution was authorized: December 1, 2020

Effective date of dissolution if applicable: upon filing
(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.

FILED
2020 DEC -7 AM 11:44
CLERK OF CIRCUIT COURT
JACKSONVILLE, FLORIDA

Signature: s/ Anthony P. Conza
(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)

Anthony P. Conza

(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: Conza Capital Corp.

The above named corporation is the subject of dissolution and the effective date of a dissolution is: upon filing

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

Description of information that must be included in a claim:

Name and Address of Creditor, any and all information supporting the claim.

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

Anthony P. Conza, 450 Alton Road, Apt. 4002, Miami Beach, Florida 33139

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.

Anthony P. Conza

Printed Name of the Person Filing

S/Anthony P. Conza

Signature of the Person Filing

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