

POO 0000 76114

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

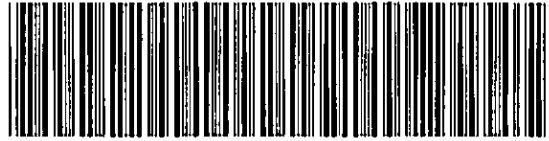
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

4085- For LForm
+ Fla EC

Office Use Only



900356204769

12/10/20--01018--029 **35.00

02/16/21--01003--002 **35.00

R WHITE

FEB 17 2021

12/10/20 15:17:35

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Marco Island Service Electric Corp

Name of Corporation

Dear Sir or Madam:

The enclosed Withdrawal Statement and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steven Paul Cobos

Name of Person

Marco Island Service Electric corp

Firm/Company

1610 Collingswood Ct.

Address

Marco Island Service Electric Corp

City/State and Zip Code

SteveCobos@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven P Cobos

239

300-3818

at ()

Name of Person

Area Code

Daytime Telephone Number

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



2021 JAN 26 2:52

FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 26, 2021

STEVEN PAUL COBOS
1610 COLLINGSWOOD CT
MARCO ISLAND, FL 34145

SUBJECT: MARCO ISLAND SERVICE ELECTRIC CORP.
Ref. Number: P20000076114

We have received your document for MARCO ISLAND SERVICE ELECTRIC CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you have submitted is to withdraw a document before it takes effect and therefore is the wrong document to use to dissolve an entity. Please see the enclosed information.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 021A00001809

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Articles OF DISSOLUTION

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Steve Cobos

(Name of Contact Person)

MARCO ISLAND SERVICE ELECTRIC

(Firm/Company)

1610 COLLINGSWOOD CT

(Address)

MARCO ISLAND FL 34145

(City/State and Zip Code)

For further information concerning this matter, please call:

Steve Cobos

(Name of Contact Person)

at (239 300 3818

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$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:

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:
MARCO ISLAND Service Corp.

SECOND: The document number of the corporation (if known): P 0000076114

THIRD: The date dissolution was authorized: 2-4-21

Effective date of dissolution if applicable: 2-9-21
(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.

Yes

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)

STEVEN P COBOS

(Typed or printed name of person signing)

(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: MARCO ISLAND SERVICE Electric Corp.

The above named corporation is the subject of dissolution and the effective date of a dissolution is: 2-4-21

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

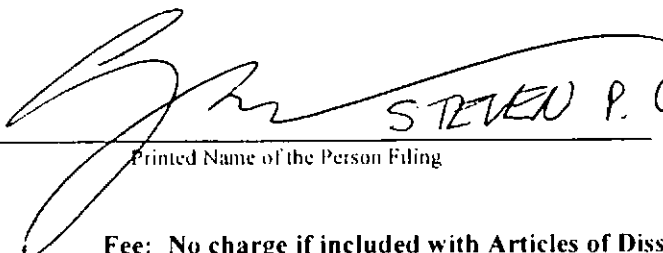
Description of information that must be included in a claim:

OWNER IS SICK

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

1610 COLLINGSWOOD CT
MARCO ISLAND FL. 34195

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.

 STEVEN P. COBOS

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