

PZH0000123 93

(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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2024 DEC 26 PM 3:48
SECRETARY OF STATE
TALLAHASSEE, FL
2024 DEC 26 AM 10:17

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com



ORDER FORM

TO: Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM: Melissa Moreau
mmoreau@incserv.com
850.656.7953

REQUEST DATE: 12/26/2024

PRIORITY: Regular Approval

OUR REF.# (Order ID#): 1334305

ORDER ENTITY:
STRATTOGUARD CORP.

PLEASE PERFORM THE FOLLOWING SERVICES:
STRATTOGUARD CORP. (FL)

File the attached dissolution document

NOTES:

\$35.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

A handwritten signature in black ink, appearing to be "M" or "N" with a stylized flourish.

SECRETARY OF STATE
TALLAHASSEE, FL

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Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

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:
StrattoGuard Corp.

SECOND: The document number of the corporation (if known): P24000018393

THIRD: The date dissolution was authorized: 12/23/2024

Effective date of dissolution if applicable: _____
(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.

Signature: Ranieri Mestroni
(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)

Ranieri Mestroni

(Typed or printed name of person signing)

Chief Executive Officer

(Title of person signing)

Filing Fee: \$35

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TALLAHASSEE, FL