

P96000094068

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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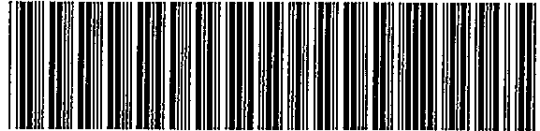
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** TONY R. INCORVATI, INC.

**DOCUMENT NUMBER:** P96000094068

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

Please return all correspondence concerning this matter to the following:

NANCY M. INCORVATI, PRESIDENT

(Name of Person)

TONY R. INCORVATI, INC.

(Name of Firm/Company)

322 MELROSE PLACE

(Address)

NAPLES, FLORIDA 34104-7885

(City/State/and Zip Code)

For further information concerning this matter, please call:

NANCY M. INCORVATI, PRESIDENT

(Name of Person)

at ( 239 ) 643-1224

(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, Florida 32314

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

## 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:

TONY R. INCORVATI, INC.

SECOND: The document number of the corporation (if known): P96000094068

THIRD: The date dissolution was authorized: MAY 16, 2005

Effective date of dissolution if applicable: JUNE 30, 2005  
(no more than 90 days after dissolution effective date)

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by of the shareholders through voting groups.

*The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:*

The number of votes cast for dissolution was sufficient for approval by

\_\_\_\_\_  
(voting group)

Signed this 17th. day of May, 2005

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)

NANCY M. INCORVATI

\_\_\_\_\_  
(Typed or printed name of person signing)

PRESIDENT

\_\_\_\_\_  
(Title of person signing)

Filing Fee: \$35

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05 MAY 20 AM 8:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA