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(Requestor's Name) (Address) (Address)
(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:
mark Coptangeni
mank Contargeni Advised to correct
corpulate name.
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: DISSOCUTION OF MOLK COSTOREUNI ENT, INC.
DOCUMENT NUMBER: 59-3453751
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MARK COSTAREGAL (Name of Person)
(Name of Person)
MARK COSTOREGNI ENT. INC
(Name of Firm/Company)
(Name of Person) MARK COSTOREGAL ENT. INC. (Name of Firm/Company) SHOP AND
(Address)
MIDMI BLU FZ. 33139 (City/State/and Zip Code)
For further information concerning this matter, please call:
MORIC COSTORICUL at (305) 775.7035
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\sum \$\subset\$
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 dissolutio	on:	·		•	•			J		
FIRST:		-		_	i with the Dep					
SECOND:	The document number of the corporation (if known): 59-3453751									
THIRD:	The date dissolution was authorized: 1/1/04									
	Effective da	ate of diss	solution <u>if a</u>	pplicable: (r	no more than 90 da	ıys after dissolu	tion file da	ite)		
FOURTH:	Adoption of	f Dissolu	tion (CHEC	K ONE)						
			арргоved by r approval.	the sharehol	ders. The nun	aber of votes	s cast fo	r disso	lutic	
	☐ Dissolu	tion was :	approved by	of the sharel	holders throug	th voting gro	oups.			
			ntement mus on the plan t		ly provided fo	r ėāch votin	g group	entitle	d to	
	The nur	nber of v	otes cast for	dissolution v	vas sufficient	for approva	l by			
			mork	C057	oup)	<u> </u>				
	Signed this _		_ day of	APLIC		, ১৩১	<u>4</u> .			
Signat	(By a directo	or, president	or other officer	if directors or o	fficers have not be nted fiduciary, by	en selected, by that fiduciary)	an i ncorp	orator -		
	_	W	مولا د	LOSTAL	\$ 6∼ 1			04 M		
			(Typed or pr	inted name of per	son signing)		MHAS	4 MAY -3	<u> </u>	
		,	Person		·		SEE.	3 PH	FILED	
			(Title	of person signing	<u>;</u>)		LI OKID	L 141 30	~	

Filing Fee: \$35