P97000094927

(Red	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	, ,
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COVER LETTER

TO: Amendment Section **Division of Corporations SUBJECT:** Dissolution of Mizner Nutrition Inc. P97000094927 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **Lorraine Powell** (Name of Contact Person) Mizner Nutrition Inc. (Firm/Company) 17555 Tiffany Trace Dr. (Address) Boca Raton, FL 33487 (City/State and Zip Code) For further information concerning this matter, please call: **Lorraine Powell** (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: ■ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 15, 2013

LORRAINE POWELL 17555 TIFFANY TRACE DR. BOCA RATON, FL 33487

SUBJECT: MIZNER NUTRITION INC.

Ref. Number: P97000094927

We have received your document for MIZNER NUTRITION INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

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.

Carol Mustain Regulatory Specialist II

Letter Number: 413A00001115

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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: Mizner Nutrition Inc.
SECOND:	The document number of the corporation (if known): P97000094927
THIRD:	The file date of the articles of incorporation: November 5, 1997
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	☐ The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH	: Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	☐ A majority of the directors authorized the dissolution.
Sigr	nature:
	Lorraine A Powell
	(Typed or printed name of person signing)
	PD
	(Title of Person Signing)

Filing Fee: \$35 -