142564

(F	Requestor's Name)	
(A	Address)	
()	Address)	
	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
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125-3-4

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: ATTICLES OF	DISSOLUTION	
DOCUMENT NUMBER: V4a	564	
The enclosed Articles of Dissolution and fe	ee are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
William J. Ja (Name of	gano Contact Person)	
	`	
Common wealth C	onsulting Corporation	
2952 Chancer	Lane	
Clear water, 7L	•	
(City/Stat	e and Zip Code)	
For further information concerning this matt	ter, please call:	
Bill Lagono	at (727) 793-9575	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amour	nt:	
\$35 Filing Fee \$43.75 Filing Fee & [Certificate of Status	Standard Status & Certified Copy Certificate of Status & Certified Copy (Additional copy is enclosed) Standard Status & Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS:	STREET ADDRESS:	
Amendment Section Division of Corporations	Amendment Section	
P.O. Box 6327	Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following rticles of dissolution:
TRST: The name of the corporation as currently filed with the Florida Department of State:
Commonwealth Consulting Corporation
ECOND: The document number of the corporation (if known): V42564
THIRD: The file date of the articles of incorporation: $(6-8-92)$.
OURTH: (CHECK AT LEAST ONE BOX)
None of the corporation's shares have been issued.
The corporation has not commenced business.
IFTH: No debt of the corporation remains unpaid.
IXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
EVENTH: Adoption of Dissolution (CHECK ONE)
A majority of the incorporators authorized the dissolution.
A majority of the directors authorized the dissolution.
Signature: Ala C.
DIRECTOR (Title of Person Signing)

Filing Fee: \$35