

PO8000040833

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

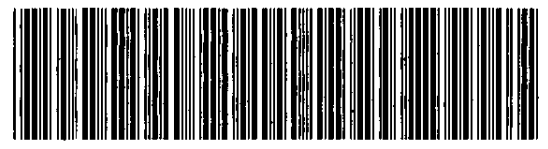
(Document Number)

Certified Copies _____ Certificates of Status

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Diss/w/ncp
[Signature]

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2010 FEB 22 AM 7:30

FILED

COVER LETTER

TO: Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**SUBJECT: Articles of Dissolution for
POWER-LINE SERVICES OF FLORIDA, INC.**

DOCUMENT NUMBER: P08000040833

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

Please return all correspondence concerning this matter to the following:

David H. Cowheard

(Name of Contact Person)

Power-Line Services of Florida, Inc.

(Firm/Company)

3625 NW 82nd Avenue, Suite 306

(Address)

Miami, FL 33166

(City/State and Zip Code)

For further information concerning this matter, please call:

David Cowheard

(Name of Contact Person)

at (**954**) **205-7972**

(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

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:

POWER-LINE SERVICES OF FLORIDA, INC.

SECOND:

The document number of the corporation (if known): **P08000040833**

THIRD:

The date dissolution was authorized: **JANUARY 29, 2010**

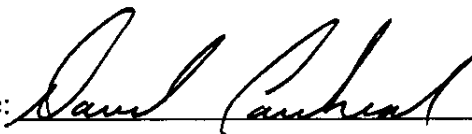
Effective date of dissolution if applicable: **JANUARY 29, 2010**

(No more than 90 days after dissolution date)

FOURTH:

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

Signature: _____



Printed name & Title of personal signing:

DAVID H. COWHEARD, PRESIDENT

2010 FEB 22 AM 7:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "*Notice of Corporate Dissolution*" is optional and is not required when filing a voluntary dissolution.

Name of Corporation:

POWER-LINE SERVICES OF FLORIDA, INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as Specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

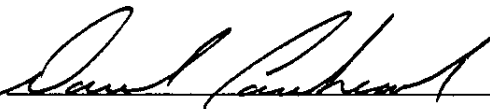
Name, address, nature of claim with amount claimed along with all supporting documentation (invoice, agreement, notes) necessary to validate claim for appropriateness.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

**3625 NW 82ND AVENUE, SUITE 306
MIAMI, FLORIDA 33166**

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Signature: _____



Printed name & Title of personal signing:

DAVID H. COWHEARD, PRESIDENT