

NP000008097

(Requestor's Name)

(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:

Office Use Only



900096327969

04/25/07--01002--022 \*\*35.00

FILED  
07 APR 25 AM 10:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NP VOLTS

TRG 4/24



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 5, 2007

LINDA BAMBI  
2200 E HALLANDALE BEACH BLVD  
HALLANDALE, FL 33009

SUBJECT: YOUR PETS TAXI SERVICE, INC.  
Ref. Number: W07000016851

✓ We have received your document for YOUR PETS TAXI SERVICE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

✓ You must dissolve the non profit corporation before the profit corporation can be filed. Please use the enclosed forms to dissolve the non profit corporation.,

✓ Please return the original and one copy of 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) 245-6929.

Justin M Shivers  
Document Specialist  
New Filing Section

Letter Number: 307A00023219

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

SUBJECT: YOUR PET'S TAXI SERVICE, INC.

DOCUMENT NUMBER: NO6000008097

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

Please return all correspondence concerning this matter to the following:

LINDA BAMBI

(Name of Contact Person)

YOUR PET'S TAXI SERVICE, INC.

(Firm/Company)

2200 E. HALLANDALE BEACH BLVD.

(Address)

HALLANDALE, FL 33009

(City/State and Zip Code)

For further information concerning this matter, please call:

LINDA BAMBI

(Name of Contact Person)

at (954) 579-1733

(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, FL 32314

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

Pursuant to section 617.1401, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

YOUR PET'S TAXI SERVICE, INC.

SECOND: The document number of the corporation (if known): NO6000008097

THIRD: The file date of the articles of incorporation: JULY 31, 2006

FOURTH: The corporation has not commenced to conduct its affairs.

FIFTH: No debts of the corporation remains unpaid.

SIXTH: Adoption of Dissolution **(CHECK ONE)**  
(Note: Cannot be authorized by an incorporator if the corporation has directors)

☒ The dissolution was authorized by a majority of the directors:  
OR

☐ The dissolution was authorized by an incorporator.

☐ The dissolution was authorized by a majority of the incorporators.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

07 APR 25 AM 10:29

FILED

Signature: \_\_\_\_\_

(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)

LINDA Bambi

(Typed or printed name of person signing)

Owner / President

(Title of person signing)

Filing Fee: \$35