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SECRETARY OF STATES
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: AMG Pro Services Inc.
DOCUMENT NUMBER: P 5000 02 47
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Angela Marie Giorgini (Name of Contact Person)
(Name of Contact Person) AMB Pro Services, Inc. (Firm/Company)
N66 W24751 Stone gate Ct. # 103 (Address)
(Address)
Sussex WI 53089
(City/State and Zip Code)
For further information concerning this matter, please call:
Angela Marie Giorgin at (850) 687-9502 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\to\$
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

articles of d	11	atutes, this Florida profit corporation submits the following	
FIRST:	13	on as currently filed with the Florida Department of State:	
	AMG Pro Ser	vices, Inc.	
SECOND:	16	the corporation (if known): <u>P 15000 02 47</u>	
THIRD:	The file date of the articles	s of incorporation:	
FOURTH:	(CHECK AT LEAST ON	E BOX)	
	None of the corp	poration'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 corpor to the shareholders, if share	ration remaining after winding up have been distributed es were issued.	
SEVENTH:	 Adoption of Dissolutio	n (CHECK ONE)	
	A majority of th	ne incorporators authorized the dissolution.	71
	A majority of th	ASSEC, FLORIUM 08	II FU
Sign	ature:		- ,
	in the hands of a receiver, trus	er officer - if directors or officers have not been selected, by an incorporator - if tee, or other court appointed fiduciary, by that fiduciary.)	
	Angela	Marie Giorgini Typed or printed name of person signing)	
	<u>own</u>	er / President	
		(Title of Person Signing)	

Filing Fee: \$35

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. Pro Services, Inc. Name of Corporation: 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: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) W24751 Storegate Ct. #103 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.

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00

gnature of the Person Filing