## F41172\_

(Reques	tor's Name)	
(Address	)	
(Address	·)	<del></del>
(City/Sta	te/Zip/Phone #)	
PICK-UP	] WAIT	MAIL
(Busines	s Entity Name)	
(Docume	ent Number)	
Certified Copies	Certificates of	Status
Special Instructions to Filing	Officer:	

Office Use Only



000025798290

12/30/03--01028--001 \*\*35.00

03 DEC 30 PH 6: 47
SECRETARY OF STATE
SECRETARY OF STATE

Vo10 1800

## TRANSMITTAL LETTER

Division of Corporations
SUBJECT: DISCOLUTION OF ABR MANAGEMENT SERVICES, INC.
DOCUMENT NUMBER: F4/172
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
GERAID G. WOODWAKD (Name of Person)
Name of Firm/Company)
6893 HOWALT CT NO. (Address)
TRCKSOWVILE, FL 32277 (City/State/and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (904) 144-8520 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$ \$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:  Amendment Section  Division of Corporations  P.O. Box 6327  STREET ADDRESS:  Amendment Section  Division of Corporations  409 E. Gaines Street

Tallahassec, Florida 32314

Tallahassee, Florida 32399

## 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 Department of State:	
	ABR MANAGEMENT SERVICES, INC.	
SECOND:	The document number of the corporation (if known): $F4/172$	
THIRD:	The date dissolution was authorized: NOVEMBER 20, 2003	
	Effective date of dissolution if applicable: DECEMBER 1, 2003  (no more than 90 days after dissolution file date)	
FOURTH:	Adoption of Dissolution (CHECK ONE)	
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.	
	☐ Dissolution was approved by of the shareholders through voting groups.	
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:	
	The number of votes cast for dissolution was sufficient for approval	
	AFF CO THE STATE OF THE STATE O	
	(voting group)	
Signed this 26th day of DECEMBER , 2003 To 5		
Signatu	re: Horal D. Woodward	
	(By a director, president or other officer - if directors or officers have not been selected, by an i ncorporator if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	
	(Typed or printed name of person signing)	
	CHAIRMAN and PRESIDENT (Title of person signing)	

Filing Fee: \$35