J29032

(Re	questor's Name)	
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(Ad	dress)	
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(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne) .
(Do	cument Number)	
Certified Copies	Certificates	of Status
	_	
Special Instructions to	Filing Officer	
Opecial instructions to	r iiiig Omoot.	

Office Use Only



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SECRETARY OF STATE
SECRETARY OF STATE

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4-18-10



April 1, 2010

MR. & MRS. GARY SHELDON 6550 BAY SHORE DRIVE SAINT CLOUD, FL 34771

SUBJECT: SHELDON MAINTENANCE SERVICE, INC.

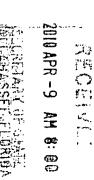
Ref. Number: J29032

We have received your document for SHELDON MAINTENANCE SERVICE, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 910A00007995



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:	
	SHERDON MAINTONINCE SERVICE, THE	
SECOND:	The document number of the corporation (if known): 399032	
THIRD:	The date dissolution was authorized: 1-1-10	
	Effective date of dissolution if applicable: \\ \frac{1-1-0}{\text{(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 by	
	Stank SCO	
	Signature: (By a director, president or other officer - if directors or officers have not been selectedly an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) (Typed or printed name of person signing)	
	Pers	
	(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.

Name of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation:

SHELDON MAINTON/ANCE SOUCE TW,

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:

Sherbon Mainton were Chosen Downs 1-1-10 And

15 No Longen in Business

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

CAMY K. SURTBON USSO BAY Shore De. St. CLOUD FC 34771

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.

Printed Name of the Person Filing

Signature of the Person Filing

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