## J53016

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ALLAHASSEF, FINALE

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1-10-01

## **COVER LETTER**

TO: Amendment Section	
Division of Corporations	
<b>SUBJECT: Articles of Dissolut</b>	ion
GUBGEC1.	
150040	
DOCUMENT NUMBER: J53016	
The enclosed Articles of Dissolution and	fee are submitted for filing.
	<b>3</b>
Please return all correspondence concerning	ng this matter to the following:
	·
Donna Payton-Hack	
	Contact Person)
M.L. Coven Exterminating	Contino Inc
M.L. Saxon Exterminating	
(FIF	m/Company)
7625 Page Boulevard	
	Address)
Ct. Lavia Missauri 62422	
St. Louis, Missouri 63133	ate and Zip Code)
(City/su	ate and Zip Code)
For further information concerning this ma	atter, please call:
Donna Payton-Hack	314 × 725_2555
Onna Payton-Hack (Name of Contact Person)	at ( 314 ) 725-2555  (Area Code & Daytime Telephone Number)
(Name of Contact Ferson)	(Alea Code & Dayume Telephone Number)
Enclosed is a check for the following amount	unt:
<b>✓</b> \$35 Filing Fee <b>☐</b> \$43.75 Filing Fee &	\$43.75 Filing Fee & \$\sums\$\$52.50 Filing Fee,
Certificate of Status	Certified Copy Certificate of Status &
	(Additional copy is Certified Copy
	enclosed) (Additional copy is
	enclosed)
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

Purşuant 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:
	M.L. Saxon Exterminating Service, Inc.
SECOND:	
THIRD:	The date dissolution was authorized: 04/30/2007
	Effective date of dissolution if applicable: 05/28/2007  (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 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
	(voting group)
	STATE ORIDA
	Signature:  (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	Gary C. Huge'
	(Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35