

K05840

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

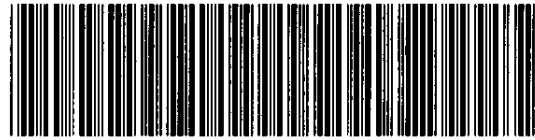
(Document Number)

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2010 APR 22 AM 9:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

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:
Quality Power Tool Service, Inc.

SECOND: The document number of the corporation (if known): K05840

THIRD: The date dissolution was authorized: 12/31/2009

Effective date of dissolution if applicable: 12/31/2009
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

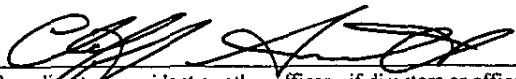
- Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
- Dissolution was approved by the shareholders through voting groups.

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)

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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)

Cliff Smith
 (Typed or printed name of person signing)

President
 (Title of person signing)

Filing Fee: \$35

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of corporation

DOCUMENT NUMBER: K05840

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

Please return all correspondence concerning this matter to the following:

Cliff Smith

(Name of Contact Person)

Quality Power Tool Service, Inc.

(Firm/Company)

PO Box 2571

(Address)

Pinellas Park, FL 33780-2571

(City/State and Zip Code)

For further information concerning this matter, please call:

Cliff Smith

(Name of Contact Person)

at (727) 546-2239

(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