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DATE:

3/19/20

NAME:

EMPLOYEE SCREENING SERVICES, INC

TYPE OF FILING: DISSOLUTION

COST:

35.00 - CheCK is attached

RETURN: PLAIN COPY PLEASE

COVER LETTER

Division of Corporations SUBJECT: _____ DOCUMENT NUMBER: _____ The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: B P Hodge (Name of Contact Person) Employee Screening Services, Incorporated (Firm/Company) 842 East PArk Av (Address) Tallahassee, FL 32301 (City/State and Zip Code) For further information concerning this matter, please call: Burt Hodge (Area Code) (Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: ■ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee. Certificate of Status Certificate of Status & Certified Copy (Additional copy is Certified Copy (Additional copy is enclosed) enclosed)

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403. Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIKST:	Employee Screening Services, Incorporated
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized:
	Effective date of dissolution if applicable: January 1, 2020
FOURTH:	Dissolution was approved by the shareholders, in the manner required by the shareholders and the articles of incorporation. The provided HAR 19 AH 8: 38 LAHASSEE, FLORIDA THE PROVIDED HAR 19 AH 8: 38
;	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)
	B P Hodge
	(Typed or printed name of person signing)
	Director
	(Title of person signing)

Filing Fee: \$35