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AND DISS

SEP 21 2017 LALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT: Dissol	ution of Corporation - Advar	nced Employee Staffing and Bo	cnefits, Inc.
DOCUMENT NI	J MBER: P00000071493		
The enclosed Arti	cles of Dissolution and	fee are submitted for filin	g.
Please return all co	orrespondence concernir	ng this matter to the follow	wing:
Dimitri M. Katsacos			
	(Name of	Contact Person)	, ,
Instant-Equity Homes	s, Inc.		
	(Fir	m/Company)	
830-13 A1A North, S	uite 311		
	(A	Address)	
Ponte Vedra Beach, F	FL 32082		
	(City/St	ate and Zip Code)	-
For further inform	ation concerning this ma	atter, please call:	
Dimitri M. Katsacos		at ((904) 487-9290	
(Name o	of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a chec	k for the following amou	unt:	
■ \$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)
Amendmen	ADDRESS: nt Section of Corporations	Ame	EET ADDRESS: ndment Section sion of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

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: Advanced Employee Staffing and Benefits. Inc. The document number of the corporation (if known): P00000071493					
SECOND:						
THIRD:	The date dissolution was authorized: September 4th, 2017			<u>-</u>		
	Effective date of dissolution if applicable: September 5th, 2017 (no more than 90 days after dissolution file date)					
	Note: If the date inserted in this block does not meet the applicable statutory filing not be listed as the document's effective date on the Department of State's records.			iate will		
FOURTH:	Adoption of Dissolution (CHECK ONE)					
	Dissolution was approved by the shareholders. The number of vote was sufficient for approval.	es cast for	dissol	ution		
	☐ Dissolution was approved by the shareholders through voting grou	ıps.				
	The following statement must be separately provided for each voting g to vote separately on the plan to dissolve:	zroup entit	led			
	The number of votes cast for dissolution was sufficient for approval by	<i>i</i>				
	Sole share holder - DM Katsacos	Acce	海河	****		
	(voting group) Signature:	ALCOHOLD STATE	SEP 20 AM 18: 06	FILED		
	(By a director, president or other officer - if directors or officers have not been selection an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduction that fiduciary)	ted, by				
	Dimitri M. Katsacos					
	(Typed or printed name of person signing)					
	President					
	(Title of person signing)			_		