

PO1000079035

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900131277599

07/02/08--01015--022 \*\*43.75

FILED  
08 JUL -2 PM 3:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

VOLDIS  
CCP-7-2

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dissolution of Company

**DOCUMENT NUMBER:** P01000079035

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

Please return all correspondence concerning this matter to the following:

Judy Clark  
(Name of Contact Person)

Alpha Omega Developmental Services Provider Inc.  
(Firm/Company)

Po Box 1057  
(Address)

Citra, FL 32113  
(City/State and Zip Code)

For further information concerning this matter, please call:

Judy Clark at (352) 502-0601  
(Name of Contact Person) (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

RECEIVED  
JUL 2 - 2008  
TALLAHASSEE, FL  
DIVISION OF CORPORATIONS

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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:

Alpha omega developmental Services provider Inc.

SECOND: The document number of the corporation (if known): PO1600079035

THIRD: The file date of the articles of incorporation: 8/24/01 ?

FOURTH: (CHECK AT LEAST ONE BOX)

☒ None of the corporation's shares have been issued.

☐ The corporation has not commenced business.

FIFTH: No debt of the corporation remains unpaid.

SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

☒ A majority of the incorporators authorized the dissolution.

☐ A majority of the directors authorized the dissolution.

Signature: Judy Ann Clark

(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.)

Judy Ann Clark  
(Typed or printed name of person signing)

Director

(Title of Person Signing)

08 JUL - 2 PM 3:58  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Filing Fee: \$35